SIR WILLIAM OSLER

MEMORIAL VOLUME

2nd Impression - 1927
[1st Impression 1926]

James B. Lisa M.D.
Fresno, California

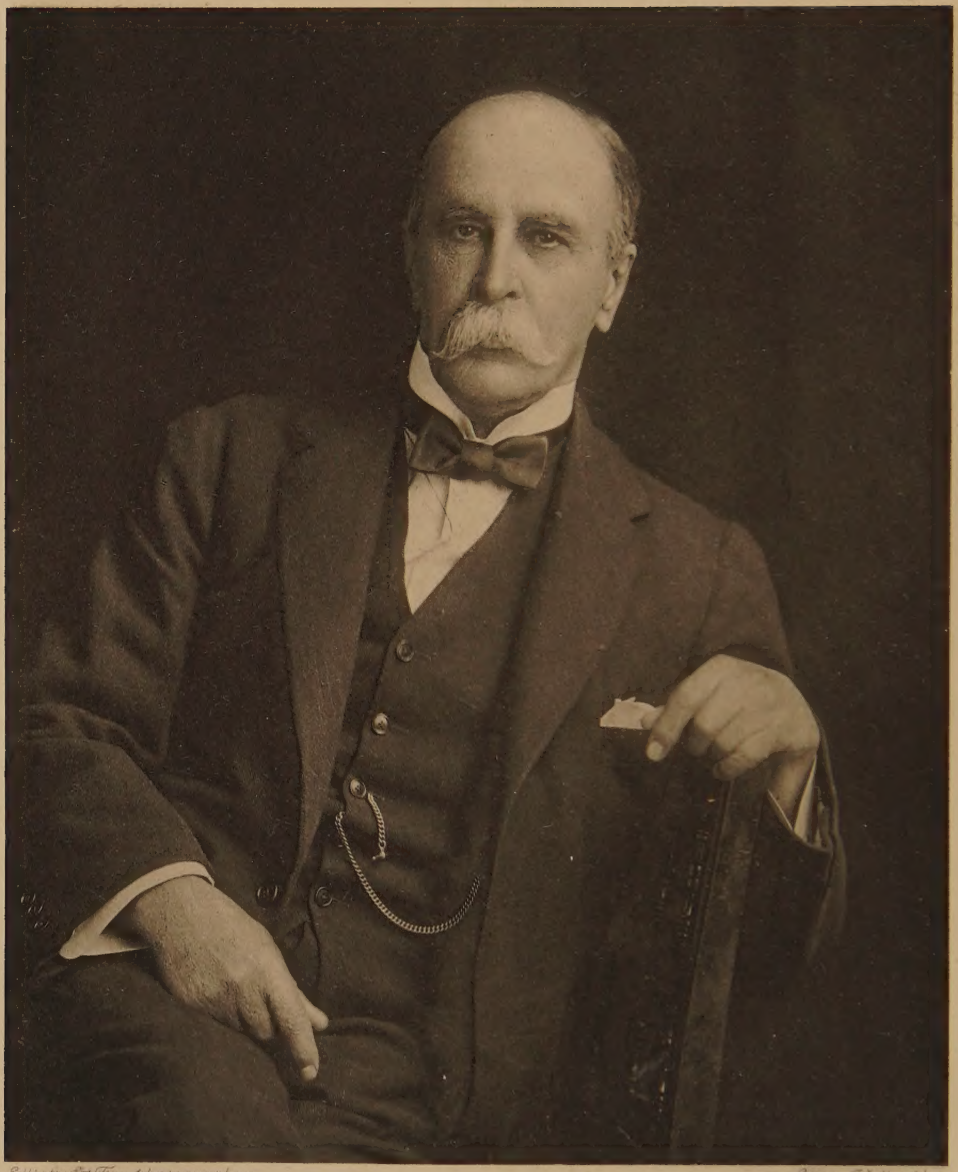
SIR WILLIAM OSLER

Memorial Number

Appreciations and Reminiscences

Fifteen hundred additional copies from this Second Impression of this Sir William Osler Memorial Volume of the International Association of Medical Museums, privately issued in January, 1927, have been numbered for the subscribers.

This is copy No. 2602



Elliott & Fry, photographers

Emery Walker ph. sc.

W. Osler

BULLETIN No. IX

of the

INTERNATIONAL ASSOCIATION OF MEDICAL MUSEUMS

AND

JOURNAL OF TECHNICAL METHODS

SIR WILLIAM OSLER
Memorial Number

Appreciations and Reminiscences

Second Impression

Edited by
MAUDE E. ABBOTT, M.D.

Privately issued at
836 UNIVERSITY ST., MONTREAL, CANADA

First Impression, June, 1926
Second Impression, January, 1927

COPYRIGHT, 1926

PRINTED BY
MURRAY PRINTING CO., LIMITED
TORONTO, CANADA

In Memoriam

SIR WILLIAM OSLER, Bart.

M.D., D.C.L., LL.D., D.Sc., F.R.S., F.R.C.P.

Born, July 12th, 1849.

Died, December 29th, 1919.

"To have striven, to have made an effort, to have been true to certain ideals—this alone is worth the struggle."

FROM "AN ALABAMA STUDENT."

"Amid Earth's vagrant noises, he caught the note sublime:
To-day around him surges from the silences of Time
A flood of nobler music, like a river deep and broad,
Fit song for heroes gathered in the banquet-hall of God."

FROM "THE DEAD MASTER," BY JOHN MCCRAE.

"Write me as one who loved his fellow-men."

LEIGH HUNT.

FOREWORD

WILLIAM OSLER

THE writings about Osler seem destined to exceed in number and in volume those of his own productive pen. The very abundance and the character of these tributes, reminiscences, estimates of the man and his work, now worthily crowned by the eagerly awaited, authoritative biography by Harvey Cushing, testify to the place held by Osler, as by no other physician of our day, and by few in all time, in the hearts and memories of hosts of friends, admirers and disciples in all lands, to the extent and variety of his interests and activities both within and without the profession, to his far-reaching influence and personal contacts, and to the human interest of the circumstances and experiences of his life.

The present volume is an interesting and valuable addition to Oslerian literature. Published under the auspices and in form as a Bulletin of the International Association of Medical Museums—one of many organizations receiving from the start Osler's active interest and support—the primary purpose of this work was to present the relations of Osler to pathological anatomy and the influence of his pathological studies and researches, especially of the early Canadian period, upon his development as a clinician and medical teacher. Most of the papers

first solicited and contributed are concerned with this important aspect of Osler's work.

This first, underlying purpose has been so expanded and modified during the five years of preparation and accumulation of material for this work under the irresistible enthusiasm, zeal and indomitable energy and perseverance of the Managing Editor, Dr. Maude E. Abbott, that there are now scarcely any aspects and no periods of Osler's life and work which have escaped attention in this volume. Through this broadening of scope the volume has gained greatly both in number and value of the contributions and in the variety of interest. All who cherish the memory of Osler have reason to be grateful to Dr. Abbott for the success with which she has brought this work into its final form in spite of unforeseen delays and difficulties.

Partly through lack of perspective and partly through absence of adequate material there is often great difficulty or even impossibility in reconstructing the personalities, careers and achievements of medical worthies of past ages, whose names have become merely a tradition, sometimes almost legendary. When Osler's name and fame have passed from living memory and become a tradition, the future historian will find abundant material to reconstruct an extraordinarily vivid and delightful personality of most engaging traits of character, mind and heart. He may note that these personal qualities and attainments appeared to his contemporaries so arresting that they formed the burden of their reminiscences and tributes to his memory without affording equal assistance

to the historian in determining those substantial contributions to knowledge, thought and action upon which enduring fame really is based.

Osler was of the best type of clinician produced in the nineteenth century, belonging, as he did, to the lineage of Laennec, Louis, Bright, Addison, Graves, Stokes, Frerichs, Jackson, Flint, Delafield, Janeway, Pepper. By early studies he acquired the naturalist's habit of mind. He approached the study of disease in the true spirit of scientific inquiry and by accurate observation. Like most of those physicians who attained the highest eminence in the past century, he entered the clinical field through the gateway of morbid anatomy, in which his studies extended to comparative pathology. He belonged to that small but attractive group of physicians, represented in all ages, who combined the broadest humanism with the best science of their day.

In his later years in Baltimore and in Oxford, Osler was well aware of the development of new lines of attack upon the problems of disease as presented by the living patient, by experimental physiological and pathological methods, and especially by application of new physico-chemical discoveries. While not at all unsympathetic with these newer directions of clinical study, they were not the lines in which his training and experience lay and which he cultivated and taught. The development of these newer fields and methods of clinical research is assuredly to be welcomed as an important part of the progress of scientific medicine, but it is pertinent to inquire whether the new order will develop clinicians with the breadth of

interest in all kinds of disease characteristic of the best of the older generation of clinicians, exemplified by Osler, the scientific basis of whose work was pathology and the analysis of accumulated clinical data. Time only can answer this question.

At the farewell dinner in his honour given by the medical profession of the United States and Canada on the eve of his departure for England in 1905, Osler said that his chief professional ambitions had been to become a clinician worthy to be ranked with Nathan Smith and other American physicians, whose names, some of which I have repeated, he mentioned, and to create a medical clinic on Teutonic lines, not on those prevailing in Great Britain and this country. His first ambition was more than fulfilled, and his second measurably so.

Osler's great opportunity for clinical work and the advancement of medical education came with his call in 1889 to Johns Hopkins, where for sixteen years he had a leading part in initiating and carrying out those reforms in hospital organization and medical instruction and research which marked an era in the development of higher medical education in America, and where he brought great renown to the Medical School. He shares with Halsted and Kelly the credit of organizing the professional staff of the hospital on a plan whereby, for the first time in America, opportunities were afforded the young resident physicians and surgeons for prolonged clinical training and research comparable to those already existing for assistants in the preclinical laboratories.

Osler's most important contribution to the system of

medical education was the organization and development at Johns Hopkins of a medical clinic, truly deserving of the name, although later much extended and improved in plan. The association of a laboratory with the clinic was a distinct advance. In the clinic students, serving as clinical clerks, were practically trained, disease was studied, as pointed out by Dr. Cole in this volume, in a truly scientific spirit, valuable contributions to knowledge originated, and over all was the guiding hand and the inspiring example of the "Chief." Several articles in this volume deal most competently with this important side of Osler's work in the Baltimore period as clinician, teacher and investigator.

Published contributions to knowledge constitute the solid basis of the permanent fame of physicians and men of science. While Osler's name is not associated with any great discovery which would place it in his own *Bibliotheca Prima*, he made many and varied new observations, partly in the field of natural science, but chiefly in that of medicine. A noticeable deficiency in the many writings about Osler has been the lack of any adequate critical estimate of the extent and value of his actual contributions to knowledge. A commendable step toward filling this gap is taken by the publication in this volume of the Classified Bibliography of Osler's publications based on the Chronological Bibliography by Miss Blogg, and prepared with great pains and skill by the efforts of several collaborators under the editorship of Fielding Garrison, the eminent medical historian and Henry W. Cattell, Editor of the International Clinics. This valuable classified

and annotated bibliography should greatly facilitate the task of carrying further than it attempts to do the accurate determination of the additions to knowledge which medicine and science owe to Osler's investigations and to his immediate supervision and stimulus.

The teacher performs a large service to his own generation, and one appreciated by future historians of medicine, who presents the existing state of medical science and art in a form as attractive and accurate, as succinct and yet full as that of Osler's—in later editions Osler and McCrae's—*Principles and Practice of Medicine.* While the life of text-books is notoriously ephemeral, we may feel assured that succeeding generations will find instruction and pleasure in the perusal of those historical and other essays and addresses, so full of wisdom, of fine culture, of charm of style, of sound precept, of out-of-the-way lore, with which Osler has delighted students, physicians, scholars and even the general public of our own day.

Osler was imbued with a strong sense of the responsibility of the physician to the profession and to the community, and any adequate estimate of his services will have much to say upon these aspects of his many-sided activities. In Baltimore his name is prominently associated, in some instances as a pioneer, with the development of hospital social service, of district and public-health nursing, of anti-tuberculosis work, of infant and child hygiene, of efficient public-health administration, and of other agencies and movements for the prevention of disease and improvement of health. He identified himself thoroughly with the life of the local profession, for whose

interests and improvement he did more than any one before or since his day by stimulating an interest in medical libraries, by active participation in the meetings of medical societies, by material assistance, by a generous social life and in manifold other ways.

It may, I think, be safely predicted that history will preserve Osler's fame as a serious and scholarly student of medical history and as a bibliographer as only second to his repute as a great clinical teacher. Possibly, being based more upon written records than upon tradition, it may be more enduring.

In the English *Who's Who*, Osler assigns "bibliography" as his recreation. But I am sure that in his case, whether he recognized it or not, historical and bibliographical knowledge and interest were far more than a mere recreation or even cultural embellishment; they constituted an essential part of his rich equipment as an inspiring teacher and student of medicine. The historical method of approach has not only an educational value as the best method of presentation and elucidation to the student of medical and scientific subjects, but it has a distinct, although inadequately appreciated, importance in stimulating and aiding scientific investigations. No small part of Osler's broadly liberal culture came from studies in medical history, biography and bibliography, which almost inevitably lead far afield into realms of classical and general literature and of social, political and philosophical history. By the foundation of the Johns Hopkins Medical Historical Club soon after the opening of the Hospital in 1889 and by his method of teaching

Osler greatly stimulated interest in the history of medicine in the minds of the students and of his colleagues and in ways more effective than by systematic lectures upon this subject.

His expectation when he accepted the call to the Regius Professorship of Medicine at Oxford, in 1904, that he could lead there a quieter life with more time and opportunity for the pursuit of his favourite studies amid congenial surroundings, was not disappointed. While Osler never neglected his work as physician, teacher and head of the medical clinic at the Johns Hopkins Hospital and Medical School, his high ideals of what the clinic should be were in course of time seriously threatened by the increasing and eventually incessant demands of outside professional engagements and consulting practice. The double burden became more than he or anyone could carry.

In my repeated visits to Sir William and Lady Osler at Oxford, he always had rare new treasures to show me which he was constantly adding to that splendid collection of medical books destined to find their permanent home at McGill University. I recall with especial delight our talks about the *bibliotheca prima*, which was to be a distinctive feature of his library catalogue. Although eager to discuss what names should be included, the final decision was to be wholly his own. While it is deeply to be regretted that Osler did not live to complete this part of the catalogue, the work has been finished with great devotion, perseverance and skill by his nephew, Dr. William Francis, aided especially by Dr. Archibald

Malloch. The publication will afford a rare treat to lovers of books and to medical historians. The selection of names for the *prima*, on the sides both of inclusion and of omission, will prove most interesting and doubtless will provoke discussion, although to me the choice, with perhaps two or three exceptions, of exclusion and of admission, seems most judicious.

Some of Osler's best touches are to be found in the citations from his notes on some of the books. I trust that I am not trespassing in quoting without asking permission, by way of illustration, a passage or two from the proofs of the *bibliotheca prima* which lie before me.

There are perhaps no two physicians in history whose spirits were more akin to Osler's than Conrad Gesner and Boerhaave. In admitting Gesner to the choice company of Leonardo, Paracelsus, Copernicus, Vesalius, Paré, Agricola and Gilbert, the only others selected to represent the sixteenth century in the *prima*, Osler is quoted as having remarked to a friend: "I am not sure that this fellow should go into *prima;* but I love him so much that I must put him there. Besides, he is the father of Bibliography." Who could be critical after reading such a confession, especially when he recalls Henry Morley's characterization of Gesner, which is almost a portrait to the life of Osler himself?: "Conrad Gesner, who kept open house.... for all learned men who came into his neighbourhood.... was not only the best naturalist among the scholars of his day, but of all men of that century he was the pattern man of letters. He was faultless in private life, assiduous in study, diligent in maintaining correspondence and

good-will with learned men in all countries, hospitable.... to every scholar that came into Zurich. Prompt to serve all....a writer of prefaces for friends, a suggester to young writers of books on which they might engage themselves, and a great helper to them in the progress of their work. But still, while finding time for services to other men, he could produce as much out of his own study as though he had no part in the life beyond its walls."

How much more precious to McGill University is the copy of the first edition of Vesalius' *Fabrica* by reason of this inscription with Osler's signature: "I am glad to be able to send this beautiful copy of the first edition to the library of my old school, in which anatomy has always been studied in the Vesalian spirit—with accuracy and thoroughness."

We may justly apply to Osler himself his own words characterizing Boerhaave: "A warm-hearted, generous, sympathetic man, a great teacher, an indefatigable worker, ... Few physicians have ever occupied so distinguished a position, and Haller justly calls him *Communis Europæ Præceptor.*" This note appears under the title of Boerhaave's *Elementa Chemiæ* and continues: "It is not a little surprising that our medical historians pass over the very work on which his reputation in science rests, and which brings him into my *bibliotheca prima*!"

It was my great good fortune to have had my last visit with my dear friend and colleague of many years in May, 1919, when he presided at the annual meeting of the British Classical Association in Oxford and delivered perhaps the finest of his addresses. The occasion was a

memorable one. No honour could have come to Osler more prized by him than election to the presidency of this Association. I felt it to be the triumphant culmination of a great career throughout which, amid professional activities, high achievements and useful services of extraordinary diversity the humanistic spirit was a quickening, delightful and pervasive influence.

William H. Welch

Baltimore, Md.

PROEM*

WILLIAM OSLER

I WAS under the belief that I knew William Osler well, intimately, almost as a brother; now I am learning how much I was mistaken. I did not know the half of him. I wonder if he himself realized all of that many-chambered mind of his, all of those many accomplishments! We others, who knew a little of his scientific researches, of his riches of knowledge, of his jewels of art and letters, we, in too many of these pursuits, were little more than children fascinated by precious stones; soon tired or tempted away we poured them back into the bowl, and forgot them. Osler diligently fashioned them all one by one into his patterns, adding group to group until none of us knew the full extent of his possessions.

One day, not long before his lamented death, Osler was teaching us how to fish for amœba in the common human mouth, and frivolously we took his device simply as a bit of craft he had recently picked up; none of us home Britons had the least idea that this demonstration was but one little excursion of an accomplished Canadian protozoologist. A perusal of some advance sheets of Professor Cushing's biography sets Osler before us in a bright light not only as a practised and ardent worker

*For announcement of the death of the Rt. Hon. Sir Thomas Clifford Allbutt, K.C.B., F.R.S., in his 89th year, while this article was in the press, see the editorial note appended.

in this field but also as a pioneer; and yet one so modest that, although myself an old friend of George Busk, G. H. Lewes and other former leaders in the study of polyzoa in England, I had no notion of Osler's standing and researches in this branch of science.

Of the fulness of his literary culture, in like manner, his colleagues had of course some, but by no means an adequate appreciation. That he had a fine taste in letters and no slight familiarity with great writers was obvious; and that he had gathered together a fine library we knew; but of the wealth of his reading, his thought, and his accomplishment, and of the extent and variety of his library, and of the measure in which he had made its contents his own, we were hardly aware until that great collection was taken in hand after his death. Even with Osler's powerful memory it is difficult to guess how in the midst of his incessant professional engagements, and of his generous social life, he found the time for literary study. Osler did not accumulate books as a hobby only; he knew them inside and out, and moreover intended them for that great service whither now they are being consigned. One day when I said to him, "You seek for the first edition of a book, I seek for the last"; he truly replied, "I want both." Even the classical side of his literary culture he had kept up with more fulness and life than many of us had understood, until we read his Address to the Classical Association at Oxford, in 1918, *On the Old Humanities and the New Science;* an Address saturated with fine culture. His memory must have been as rare as his discernment, yet it was his servant, not his

master. But I suppose the strongest side of his scholarship was in the History of Medicine and of great physicians.

Of Osler's insight and abounding knowledge in clinical medicine we could not remain ignorant, even on this side of the water; nor did we lack some vivid impression of his ascendancy as a teacher; though we hardly did full justice to his attainments as a pathologist. He was the first medical teacher of his day, as fertile and magnetic in his time as was Boerhaave; and this not merely by reason of his experience, learning and laboratory research, not merely by his wit and humour, and ready illustration, but moreover by reason of his instinctive sympathy with young people. This in him was no condescending favour; it was an outflow of the perennial youth in his own nature; to the last he was one of them. As with the faculties of the mind so with bodily exercises; we learned that his occasional wrestlings and somersaults with the boys were not just extempore frolics but the diversions of one who in his earlier life had been a practised athlete. But of his past achievements in this arena he never said a word.

However, he sympathized with the old as well as with the young; the generosity of his hospitality was as openhearted as his entertainment of his guests was delightful. His conversation was without effort or show, but always gave his friends the impression of stores of wisdom and knowledge held in a modest and almost shy reserve.

Such was the man in all things; unselfish even to self-effacement. More of him, far more of him, would have

been welcome; but that was not his way. He did not so much avoid show and egotism as ignore their existence. To get at the flow of his knowledge and experience he had to be aroused by some topic in which he was specially interested; then in the animation of talk he would bring forth things both new and old. In this characteristic Osler, if less colossal, reminded me of Acton.

Such, as reflected in a dim mirror, was one of the most interesting and richly endowed minds and lovable characters in the story of our profession; with the culture of Linacre and the clinical insight of Sydenham, his name will live in our history, not so much perhaps for great discoveries as for mastery of medicine, fertile teaching, wide attainments, great natural faculties, cultivated taste, and delightful humour; qualities all mellowed by a spirit of wisdom, gentleness and loving-kindness. His "little nameless unremembered acts of kindness and love" were for the most part unseen. He was even capable, as I know, of lending choice books from his library, readily and ungrudgingly. If the rareness of his accomplishments is proving now to be even more than the already very high estimate of his friends on both sides of the great water, it is because he made a name, won the hearts, and divided his gifts, between the people of two worlds. In America, in Great Britain and in the Dominions he was known and beloved; but in each country he developed attributes some of which were lost or imperfectly seen in the other. Not till now have we come all together to recognize the full height, breadth and depth and width of the man.

I am thankful therefore to be allowed to add to that

of many others, my poor appreciation of Osler's life; it remains for my colleagues, and especially for his pupil Dr. Cushing, to narrate that life with the fulness of detail which it both demands and supplies.

Regius Professor of Physic,
Cambridge University, Cambridge, England

October, 1924

EDITORIAL NOTE. While the foregoing article was in press, the sad news came of the death, on the night of February 22nd, 1925, of Sir Thomas Clifford Allbutt, Regius Professor of Physic at Cambridge University, in the eighty-ninth year of his age. On December 25th, 1924, he had written to the Managing Editor of this volume: "Your letter is indeed a prize for me on this Christmas day. Although I cannot allow myself to accept in their fullness the generous words of it, yet I may take the comfort of thinking that my small pebble contributing to the great cairn is not unworthy of its place on so memorable an occasion." The final revision of page proof, addressed in his own handwriting, was forwarded only a few days before the date of Sir Clifford Allbutt's death, so that this tribute to the memory of his dear friend and colleague was one of the last literary activities of this

great physician, writer and scholar, the most distinguished in British medicine at the time of his death.

The sympathetic and appreciative tributes of the late Regius Professor of Physic at Cambridge University, paid both here and elsewhere to his departed brother Regius at Oxford, afford some indication of the intimate relations and friendship and the remarkable community of interests between these two outstanding figures of modern medicine. Both were eminent teachers and students of medicine, bringing great distinction to their respective universities, both were writers and speakers of unusual although differing charm of style, both mingled the scholar's culture, humanism and reverence for the past, with the keenest interest in the present and the widest vision for the future, both had a genius for friendship, exerting great influence in their day and generation, and the passing of both is mourned throughout the English-speaking world.

EDITORIAL PREFACE

THE conception of a Memorial Volume from this Association took form as the result of a Symposium upon the relations of the late Sir William Osler to it and its activities, held at the Annual Meeting at Cornell University Medical College in the spring of 1920. It was recalled then, with deep appreciation, that this Society is one of the many movements of his time that owe their successful inception and development to the sympathetic cooperation and active practical support given them by Sir William Osler in the early days of their organization; that in this sense it forms an integral part of that great wave of advancement in scientific medicine which he imparted so freely to his younger contemporaries; and that the legitimate field of work of this Association, namely, the study of morphology and of the technical methods of its approach, was the avenue through which, by years of faithful study and service, Osler, the most beloved physician of our day, attained those high achievements in clinical teaching and practice that place him among the Masters of Medicine of all time.

During the six years that have elapsed since then, this original plan has been extended, as has been pointed out by Professor Welch in the Foreword, so that it now includes articles reminiscent of every phase of Osler's activities, and the entire span of his many-sided life. The causes for this expansion of the original idea have lain in part in the extraordinarily active response which was made to the appeal for contributions in the form of original articles written especially for this volume, which by their own content largely decided its extended scope, while their value and importance demanded and deserved the more complete setting that is here given; and further, the generous and substantial support which was

given to this undertaking at the outset by those who stood closest to Sir William Osler in his professional and private life, and which was felt by the Editors, who were thus sponsored, as pledging them to the production of a worthy and lasting memorial. In this connection we refer especially to the grant made by the National Research Council of Washington, on the recommendation of Professor William H. Welch, towards the cost of publication of this volume and of Bulletin VIII as a "Journal of Technical Methods" (Part I of the Memorial), and the large initial contributions to the publication fund of this volume made by the late Sir Edmund Osler, the late Hon. Mr. Justice Featherston Osler and others.* Even in its present form, however, the work has, we think, remained true, in the larger sense, to its original conception, for the cultural influences of Osler's boyhood and the intensive morphological studies of his earlier professional years, strike a dominant note in nearly all the contributions, and run, like a golden thread, through the various periods of his life, revealing themselves here as the direct antecedents of the culminated experience and influence that enriched his later years. In the volume as it now stands, there are omissions, and, in spite of considerable pruning, there is still some overlapping, but the one hundred and nineteen articles which it contains are sufficiently diversified and representative to permit of their construction here into an ordered whole, from which, as well as from its Bibliographies, there shines a light which, we venture to hope, may help to keep the torch of memory aglow. In any case, the object of this volume will have been attained if it fills the double purpose of serving as an Appendix to Dr. Cushing's great Biography, and of supplying, as it were, the unsmelted ore from which the future historian may extract that first-hand evidence which may enable him to rightly estimate the

*See List of Subscribers to the Publication Fund at back of this volume.

service which William Osler rendered to his day and generation, and, through these, to the generations yet to come.

This volume may not go to press without expressing the thanks of those who have been engaged in its preparation to those who have made its appearance possible by their generous subscriptions to its publication fund, and to all who have assisted in its composition by articles or illustrations. To Professor William H. Welch and the late Sir Thomas Clifford Allbutt our gratitude especially goes out for their delightful introductory articles, by means of which they have set upon this memorial the stamp and seal of Osler's two greatest contemporaries in the English speaking world, who have together shared with him the heights of international fame, and whose personal intimacy was among his dearest joys. By his masterly survey and apprizement of the volume and its contents in his Foreword, Professor Welch has given dignity and unity to this whole endeavor; while the tender feeling for his beloved colleague that breathes from what proved to be Sir Clifford Allbutt's last literary production, has tinged his Proem with the charm of personal affection and the pathos of a touch that is but now stilled.

It is our pleasant duty to acknowledge, too, the assistance rendered in the editorial and executive part of the work of this volume, and in this connection our sincerest thanks are here expressed to Dr. F. J. Shepherd, Osler's early college-mate and colleague and life-long friend, for his revision of practically all the accepted manuscripts; to Dr. Charles F. Martin, Dean of the Medical Faculty of McGill, for acting as joint Trustee of the moneys received for the publication fund, and for receiving subscriptions in Canada; to Dr. W. C. Davison of the Johns Hopkins Medical School, for receiving subscriptions in the United States, and for otherwise furthering the distribution;

to Sir Humphry Rolleston and Dr. Stewart Lydia Henry, for their kindness in receiving and forwarding subscriptions from Great Britain, and to Dr. Henry and Dr. Margaret Owens of Montreal, for assistance with the proofs of the Classified Bibliography; to Major James F. Coupal, of the Army Medical Museum, Washington, for placing his resources at the disposal of the Editors in the work of the Classified and Annotated Bibliography, and for promoting in every way in his power the interest and advancement of the work; to Dr. Archibald Malloch, for the assistance rendered by his judgment and intimate personal knowledge of the facts with which this volume deals; to Miss Edith Brownlee, Secretary of the McGill Medical Museum, for her efficient conduct of the local side of the work; and to the Murray Printing Company of Toronto, for their patience, co-operation and skill in overcoming the many difficulties that have attended the publication of this volume.

Maude E. Abbott

April, 1926 *For the Committee*

COMMITTEE

Editorial Board

F. B. MALLORY, - - Boston
A. S. WARTHIN, - Ann Arbor
L. J. RHEA, - - - Montreal
JAMES F. COUPAL, Washington
JAMES EWING, - New York
G. R. CALLENDER, Washington
H. T. KARSNER, - Cleveland
E. B. KRUMBHAAR, Philadelphia

Managing Editor

MAUDE E. ABBOTT
McGill University, Montreal

Editors of Classified Bibliography of Osler's Publications

FIELDING H. GARRISON; HENRY W. CATTELL
Washington, D.C.

Editorial Secretary

EDITH BROWNLEE
836 University St., Montreal

FOREWORD TO SECOND IMPRESSION

WITHIN six months of its publication, 1500 copies of this Memorial Volume, issued in June, 1926, have been distributed to the subscribers, and a second Impression has become necessary to meet the continued demand. The warm and generous reception thus accorded is but another evidence of the universal affection in which the memory of the late Sir William Osler is held by his own and the succeeding generations at the present time. The many tributes here assembled, simple and unassuming as they are, have sprung direct from the experience and the hearts of those who knew and venerated and loved him, and the note of restrained hero-worship here revealed strikes an answering chord in all to whom the best ideals of the profession are dear. For there emerges, from every page of this kaleidoscope of memory, the pattern of honesty and integrity of thought, broad humanitarism of purpose, enkindling love of his fellows, and unselfish power of sympathy, which, linked with that passion for truth in detail and unwearying capacity for work that men call genius, together made up the character of the man we knew as Osler. As Dr. Camac has said here under the title "The Duty of the Disciple",—an example such as Osler gave can only be transmitted effectively by the personal word of those who themselves, saw, heard, and knew him, and felt his influence. This little army of writers is of these, and from their contributions here assembled his "Message" breathes, in terms of homage so sincere and affection so genuine, that it cannot but arrest our attention and hold our interest. The same is true of the classified annotated Bibliography of Osler's publications, which is in itself a revelation, all the more

valuable because unconscious, of his extraordinary productivity, and of the great powers of observation and the wealth of personal research which underlies every part of the immense contribution which he made to the medical science and the progress of his time.

In this second Impression, which is numbered consecutively with the first, and is issued under exactly the same conditions, three new illustrations, contributed by Dr. C. K. Winne, have been introduced in the Baltimore period (facing pages 310 and 311), and ten additional Appreciations and Reminiscences which were received too late to be included in the previous issue. These are the articles by Drs. J. B. McConnell and F. G. Finley, (pages 175, 183), Sir E. Sharpey-Schäfer (page 351), Drs. Harry Marshall, L. G. Rowntree, A. M. Foshay, Kate Campbell Mead and W. Grant Stewart, "Osler and Trudeau" by Lawrason Brown, and the new sonnet "The Healer" by Marian Osborne (pages 436 *et seq.*). Another new feature of this issue is the fine colour print of Sargent's great picture, "The Four Doctors."

Two curious typographical errors occurred in the first Impression which have been corrected in this, but are mentioned here for the benefit of those who own the previous volume. The inscription facing page 392 should read: "William Osler in the Chair of *Edward* Jenner", instead of *William* Jenner as there printed, and the statement on pages 573 and 575 that Osler's remarks on receiving the Anniversary volumes in 1919 were in *reply* to an address by Lieutenant-Colonel Fielding H. Garrison was erroneous, the address of Presentation on that occasion having been delivered by the late Sir Clifford Allbutt.

Maude E. Abbott

January 6th, 1927

TABLE OF CONTENTS

FRONTISPIECE. *From a photograph presented by Lady Osler for publication in this volume.*

Page

FOREWORD. William Osler i
William H. Welch, M.D., Sc.D., LL.D., Baltimore, Md.

POEM. William Osler xiii
Rt. Hon. Sir Clifford Allbutt, K.C.B., F.R.C.P., F.R.S. Late Regius Professor of Physic, Cambridge, England

Editorial Note. [The Death of Sir Clifford Allbutt] . . . xvii

EDITORIAL PREFACE: "For the Committee" xix

FOREWORD TO SECOND IMPRESSION xxiii
Maude E. Abbott, M.D., Montreal

Poem. William Osler xl
W. S. Thayer, D.S.M., M.D., LL.D., Baltimore, Md.

EDITORIALS:

Osler and the International Association of Medical Museums 1
A. S. Warthin, A.M., M.D., Ph.D., Ann Arbor, Mich.

Osler and the Medical Museum 5
Sir Arthur Keith, K.B.E., F.R.S., LL.D., F.R.C.S., D.Sc., London, England

Our Debt 7
Oskar Klotz, M.D., Toronto

Osler—Éducateur 9
Professor Pierre Marie, Paris, France

Osler and Endocarditis and Mycotic Aneurisms . . . 10
E. Libman, M.D., New York

EDITORIALS—*Continued*

Page

Osler and Pathology 12
L. J. Rhea, M.D., Montreal

The Duty of the Disciple 14
C. N. B. Camac, M.D., New York

Sir William Osler als Verkünder der Internationalen Medizin. (Sir William Osler an Apostle of International Medicine.) 16
Professor J. Ludwig Aschoff, Freiburg, Germany

Osler's Gift to the Study of Medicine 20
James F. Coupal, M.D., Washington, D.C.

Sir William Osler in Roma 22
Professor Ettore Marchiafava, Rome, Italy

Literary Influences on the Writings of Osler 29
Francis R. Packard, M.D., Philadelphia

Osler und die Geschichte der Medizin 32
Professor Karl Sudhoff, Leipzig, Germany

GENERAL ARTICLES:

Osler's Place in the History of Medicine 33
Lt.-Col. Fielding H. Garrison, M.C., (U.S.A.), M.D., Washington, D.C.

Sir William Osler 37
Sir German Sims Woodhead, F.R.C.P., (Edin.), F.R.S., Cambridge, England

The Influence of Pathology upon the Clinical Medicine of William Osler 41
Thomas McCrae, M.D., F.R.C.P. (Lond.) Philadelphia

Osler as Clinician and Teacher 45
C. F. Martin, M.D., Montreal

Sir William Osler, Teacher and Student 50
Rufus Cole, M.D., New York

The Influence of Dr. Osler on American Medicine . . 56
George M. Kober, M.D., Washington, D.C.

GENERAL ARTICLES—*Continued*

Page

Osler and Tuberculosis 62
Joseph H. Pratt, A.M., M.D., Boston, Mass.

Sir William Osler's part in the Medical History of the War and the Organization of the British Medical War Collections 83
J. G. Adami, C.B.E., F.R.S., LL.D., F.R.C.S., Liverpool

Osler, the Medical Editor 91
Henry W. Cattell, A.M., M.D., Editor of the International Clinics, Washington, D.C.

Osler in Vacation 94
Henry Barton Jacobs, M.D., Baltimore, Md.

Sir William Osler as a Bibliophile 100
Leonard L. Mackall, Savannah, Ga.

Sir William Osler on The Evolution of Modern Medicine. 104
W. W. Chipman, M.D., Montreal

BIOGRAPHICAL:

Early Years (1849–1869)

The Early Life of Sir William Osler, his Cultural and Scientific Training 109
Norman B. Gwyn, M.D., Toronto

Osler as Naturalist 149
J. L. Todd, M.D., Montreal

Montreal Period (1870–1884)

Address on Osler's Montreal Period, delivered at the Osler Memorial Meeting of the New York Academy of Medicine, February, 1920 153
F. J. Shepherd, M.D., LL.D., F.R.C.S., Montreal

Osler's Early Work for Canadian Scientific Societies and as a Teacher in Montreal 158
A. D. Blackader, M.A., M.R.C.S., LL.D., Montreal

The Earlier Years of Sir William Osler 163
E. J. A. Rogers, M.D., Denver, Colorado

Recollections of Sir William Osler 171
Marian Osborne, Ottawa

Page

Student Reminiscences from Montreal Period:

J. B. McConnell (*M.D., 1873*), *LL.D.*, Montreal . 175

Geo. E. Armstrong (*M.D. 1877*), Montreal 177

Casey A. Wood (*M.D. 1877*), *LLD., D.C.L.*, Chicago, Ill. 179

J. B. Lawford (*M.D. 1879*), *LL.D., F.R.C.S.*, (*Eng.*), London, England 180

Murdoch Chisholm (*M.D. 1879*), Halifax, N.S. . . 181

E. Weir Smith (*M.D. 1882*), West Meriden, Conn. 181

R. F. Ruttan (*M.D. 1884*), *and* (*through R. F. R.*) *the late Wyatt Galt Johnston* (*M.D., 1884*) . . 182

F. G. Finley (*M.D. 1885*), *LLD.*, Montreal . . 183

D. Gibb Wishart (*M.D. 1885*), Toronto 184

J. Herbert Darey (*M.D. 1885*), Sioux City, Iowa . 185

A. Schmidt (*M.D. 1886*), Montreal 186

See also Reminiscence by W. Grant Stewart, M.D., in Addenda page 438 *et seq.*

I. The Pathological Collections of the late Sir William Osler at McGill University. Early Academic Influences. McGill's Heroic Past. II. Personal Reminiscence 187
Maude E. Abbott, M.D., L.R.C.P. & S., Montreal

Sir William Osler and the McGill Medical Library . . 200
Jean Cameron, Montreal

A reminiscence of Sir William Osler 202
D. Bryson Delavan, M.D., New York

Philadelphia Period (1885-1889)

FOREWORD—Dr. William Osler in Philadelphia 205
C. K. Mills, A.M., M.D., Ph.D., Philadelphia

Dr. William Osler in Philadelphia 208
George Dock, A.M., M.D., D.Sc., St. Louis, Mo.

Osler as a Teacher and Clinician in Philadelphia . . 212
Hobart Amory Hare, M.D., LL.D., Philadelphia

Page

Personal Reminiscence 218
Jos. Leidy 2nd, A.M., M.D., Philadelphia

Student Reminiscences from Philadelphia Period:

William A. Edwards, M.D., Los Angeles . . . 223

Charles W. Burr, M.D., Philadelphia 224

F. X. Dercum, A.M., Ph.D., M.D., Philadelphia 227

Morris J. Lewis, M.D., Philadelphia 229

Harry M. Toulmin, M.D., Philadelphia . . . 231

A. C. Wood, M.D., Philadelphia 232

Elizabeth L. Peck, M.D., Philadelphia . . . 233

Thomas Hubbard, M.D., New York. 233

The Pathological Records of the Blockley Hospital . 234
H. R. M. Landis, A.M., M.D., Philadelphia

Osler's Connection with the College of Physicians of Philadelphia 239
E. B. Krumbhaar, Ph.D., M.D., Philadelphia

Dr. Osler in Philadelphia, Editor and Clinician . . . 245
J. C. Wilson, A.M., M.D., Philadelphia, Pa.

A Tribute to Sir William Osler 248
W. W. Keen, Ph.D., M.D., Sc.D., LL.D., M.D. (Hon.) Philadelphia, Pa.

Books and the Man—William Osler. *Poem* 251
By the late S. Weir Mitchell, M.D. of Philadelphia

Baltimore Period (1889-1905)

FOREWORD—Dr. Osler as the young Physician's Friend and Exemplar 253
Llewellys F. Barker, M D., M.D. (Hon.), LL.D., Baltimore

Osler as I knew him at Philadelphia and Johns Hopkins 261
Howard A. Kelly, M.D., LL D., Baltimore

The Personality of William Osler in Baltimore . . . 264
Henry M. Hurd, M.A., M.D., LL.D., Baltimore

BALTIMORE PERIOD—*Continued*

Page

Osler and the Student 267
T. R. Brown, M.D., Baltimore

Early Days at the Johns Hopkins Hospital with Dr. Osler 270
H. A. Lafleur, M.D., Montreal

A Personal Appreciation of the late Sir William Osler 275
John T. Finney, M.D., F.R.C.S. (Hon.), Baltimore

Osler 288
W. S. Thayer, M.D., LL.D., F.R.C.P.I. Baltimore

Reminiscences of Sir William Osler 296
Charles P. Emerson, M.D., Indianapolis

Student Reminiscences:

A. C. Abbott, M.D., Sc.D., D.P.H., Philadelphia 306

George Blumer, M.D., New Haven, Conn. . . 308

Tillie M. Spencer, Baltimore 310

Helen MacMurchy, M.D., Ottawa 311

Esther Rosencrantz, M.D., San Francisco . . 313

Lawrence J. Rhea, M.D., Montreal 314

Hunter Robb, M.D., Winchester, Mass. . . . 314

D. S Lamb, M.D., Washington, D.C. 316

H. E. Robertson, M.D., Rochester, Minn. . . 317

Osler as an Incentive 318
C. D. Parfitt, M.D., Gravenhurst, Ont

Making Ward-Rounds with "Dr. Osler" 322
Claribel Cone, M.D., Baltimore, Md.

Osler and the Anti-Tuberculosis Movement. Personal Reminiscence 323
S. Adolphus Knopf, B.Sc., M.D. (Paris), New York

Osler and Medical Gatherings 330
C. N. B. Camac, M.D., New York,

BALTIMORE PERIOD—*Continued*

Page

Dr. Osler and the Interurban Clinical Club 335
David Riesman, M.D., Philadelphia

Dr. Osler and the Medical Profession of Maryland . . 340
Harry Friedenwald, M.D., Baltimore

Osler's Influence on Medical Libraries in America . . 342
John Ruhräh, M.D., Baltimore

See also Articles in Addenda by Harry Marshall, L. G. Rowntree, P. Maxwell Foshay, Kate Campbell Mead and Lawrason Brown.

English Period (1905–1919)

Sir William Osler in Great Britain (Foreword) 347
Sir Humphry Rolleston, Bart., K.C.B., C.B., M.A., M.D., D.C.L. (Hon.), LL.D. (Hon.), D.Sc.
Regius Professor of Physic in the University of Cambridge, Physician-in-Ordinary to H. M. the King, London, England

Reminiscences of Sir William Osler 351
Sir E. Sharpey Schäfer, F.R.S., LL.D. (Hon.) D.Sc. (Hon.) North Berwick, Scotland

Appreciation of Sir William Osler 353
Sir William Hale-White, K.B.E., M.D., F.R.C.P., (Lond.), London, England

Sir William Osler's Work at the Radcliffe Infirmary and for the Prevention of Tuberculosis 357
William Collier, M.A., D.M., M.R.C.P., Oxford, England

Personal Reminiscence 360
F. Parkes Weber, M.A., M.D., F.R.C.P. (Lond.), London, England

The Influence of Sir William Osler in Oxford 361
Charles Singer, M.D., D.Litt., F.R.C.P., London, England

Sir William Osler at Oxford 364
Archibald Malloch M.D., M.R.C.P. (Lond), Montreal

Sir William Osler at Oxford 379
A. G. Gibson, B.Sc., M.D., F.R.C.P., Oxford, England

ENGLISH PERIOD—*Continued*

Page

Sir William Osler and an Oxford Medical Student . . 382
Wilburt C. Davison, M.D., Baltimore

A Medical Student's Memories of the Regius Professor 386
Wilder Penfield, M.D., New York, N.Y.

Reminiscences of Sir William Osler in England . . . 389
Wu Lien-Teh (G. L. Tuck), M.A., M.D., (Cantab)., Hon. LL.D. (Hongkong), Litt.D. (Peking), Sc.D. (Shanghai), Director and C.M.O. of the Manchurian Plague Prevention Service, Physician Extraordinary to the President of China

Sir William Osler and the American Medical Officer . . 392
Brig-General Francis A. Winter, M.C., U.S., Army, M.D., Washington, D.C.

A Reminiscence 393
R. Tait McKenzie, M.D., LL.D. (Hon.), Philadelphia

Impromptu in a Library 394
Edward Clark Streeter, M.D., Boston, Mass.

A Visit with Dr. Osler in Oxford 398
Walter M. Bierring, M.D., M.R.C.P., (Edin.), Des Moines, Ia.

Glimpses of Osler During the War 402
Henry R. Viets, M.D., Boston

Sir William Osler as Host to Americans in England during the War 406
G. W. Norris, M.D., Philadelphia

Sir William Osler—Physician and Philanthropist—Glimpses during the World War 409
Edgar Lorrington Gilcreest, M.D., San Francisco, Cal.

Recollections of Sir William Osler's Visit to No. 3 Canadian General Hospital (McGill) 419
C. A. P. Howard, M.D., Iowa City

The Last Days 421
J. George Adami, C.B.E., F.R.S., LL.D., Liverpool

ENGLISH PERIOD—*Continued*

Page

William Osler. *Poem* 429
Marian Osborne, Ottawa, Canada

The Death of Osler 430
T. R. Brown, M.D., Baltimore

Envoi: Sir William Osler, Clinician, Teacher 431
Stewart R. Roberts, M.D., Atlanta, Ga.

Addenda

The Healer. (Poem) 436
Marian Osborne, Ottawa, Canada

Recollections of Dr. Osler's Method 437
Harry T. Marshall, M.D., University of Virginia, Va.

Personal Reminiscences 438b
L. G. Rowntree, Rochester, Minn.

Dr. Osler on the Organization of the American Medical Association 438d
P. Maxwell Foshay, M.D. Montclair, N.J.

Osler and Trudeau 438f
Lawrason Brown, M.D. Saranac Lake N.Y.

A few Vignettes from the Memory of Sir William Osler 438g
Kate C. Mead, Middletown, Conn.

Personal Reminiscences 438i
W. Grant Stewart, M.D., Montreal

Some Personal Recollections of Sir William Osler . . 439
Lawrason Brown, M.D., Saranac Lake, N.Y.

In Memoriam

The Sir William Osler Memorial at Oxford. (Extract from letter received from:) 451
Sir Archibald E. Garrod, K.C.M.G., F.R.S., LL.D., F.R.C.P. (Lond.), M.R.C.S., Regius Professor of Medicine, Oxford University

The Unveiling of the Oxford Memorial Plaque 452
Lydia S. Henry, M.D., Ch.B. (Sheffield), Montreal

Brief Report of Presentation of Memorial Plaque to Johns Hopkins Hospital, January 19th, 1925 . . . 453
T. B. Futcher, M.D., Baltimore, Md.

IN MEMORIAM—*Continued*

Page

The Unveiling of the Osler Memorial Tablet at the Montreal General Hospital 455
Margaret M. Owens, M.B., Montreal

The Hamilton Memorial for Wentworth County . . . 457
J. Heurner Mullin, M.D. (Hon.), Hamilton, Ont.

The Housing of the Osler Collection in the Medical Building of McGill University 462
C. F. Wylde, M.D., Montreal

BIBLIOGRAPHICAL:

The Johnson Cabinets in the Academy of Medicine of Toronto 465
Jabez H. Elliott, M.D., Toronto

CLASSIFIED AND ANNOTATED BIBLIOGRAPHY OF SIR WILLIAM OSLER'S PUBLICATIONS. (Based on the Chronological Bibliography by *Minnie W. Blogg*). 471
Compiled, augmented and annotated by Maude E. Abbott, Montreal; Minnie Wright Blogg, Baltimore; E. B. Krumbhaar, Philadelphia; and Archibald Malloch, Montreal. Edited by Fielding H. Garrison and Henry W. Cattell, Washington

I. Natural Science and Research 473
II. Pathology, Comparative 479
Pathology, Human 483
III. Clinical Medicine 513
IV. Literary Papers 560
V. Medical Education, etc. 576
VI. Public Welfare, War 593
Note on Sir William Osler in France 600
Brig. Gen. H. S. Birkett, C.B., M.D., LL.D., Montreal
VII. Volumes Edited 602

BIBLIOGRAPHY OF WRITINGS ABOUT OSLER 607

LIST OF SUBSCRIBERS TO THE PUBLICATION FUND . . . 627

LIST OF ERRATA 634

LIST OF ILLUSTRATIONS

FRONTISPIECE: Sir William Osler (Presented by Lady Osler). *Photogravure Engraving*

	Facing Page
EDITORIALS AND GENERAL ARTICLES:	
William Osler—Enlargement from the Painting by Sargent (Presented by Lady Osler)	xl
Osler and the Patient	44
Osler at the Bedside	45
Facsimile of page of Osler's corrected manuscript	92
American Pilgrimage to Louis' Tomb, October, 1905	93
Sir William Osler. From the Bas-relief by Monsieur F. Vernon. By permission of Dr. Henry Barton Jacobs.	107
BIOGRAPHICAL:	
	Page
Coats of Arms, or Seals, of the five Universities which were the scene of Osler's academic activities	107
EARLY DAYS:	
Title Page of "Burrowing and Boring Marine Animals," by Edward Osler	113
Title Page of "The Life of Admiral Viscount Exmouth"	114
Title Page of "Church and King"	115
Reproduction from Edward Osler's "Burrowing and Boring Marine Animals," *Philosophical Transactions*, 1826, Plate xiv.	116
Reproduction from the same, Plate xv	117
Reproduction from "Marine Testaceous Mollusca," by Edward Osler, *Proceedings Royal Society*	118
Map showing District North of Toronto	119
The Parsonage at Bondhead	120
Certificate of Sir William Osler's Baptism	122
Family Group showing Sir William Osler at the Age of Seven	123
Acrostic by J. Orlando Orr, M.D.	124
Rev. W. A. Johnson, "Priest of the Parish of Weston"	127

EARLY DAYS—*Continued*

	Page
Photograph of pages of Johnson's Catalogue	127
School at Weston. with chapel as originally built.	129
School Details	130
Osler as Prefect at Weston	131
Entry at Trinity. *From the Register*	131
Dundas Marsh	135
James Bovell	137
Title Page from "Anatomy of the Leech," by James Bovell	138
Original Drawing from the same, by James Bovell	139
Microscopes used by Osler	140

MONTREAL PERIOD:

	Facing Page
The Medical Faculty of McGill University, 1881	152
William Osler, George Ross, F. J. Shepherd, 1879	153
Medical Faculty Building, on Coté Street, Montreal, where Osler graduated from McGill in 1872	155
Osler as a Student at McGill	174
Osler in 1881	174
William Osler—Early Portraits	175
Montreal General Hospital at the time of Osler's Service. *Photogelatin Print*	190
Dr. R. P. Howard	192
Malignant Endocarditis of Bicuspid Aortic Valve. Specimen in the Pathological Museum of McGill University, presented by Dr. Osler in 1882	193
McGill Pathological Museum in 1905 (burned down in 1907)	194
A Page from Dr. Osler's Pathological Reports Book, Montreal General Hospital, 1877	195
The Reading Room of the McGill Medical Library as it was in Osler's time	200

PHILADELPHIA PERIOD:

Dr. Osler during his Philadelphia period (about 1887)	204
Osler at the Orthopaedic Hospital, with Nursing and Interne Staff. (Illustrating the Reminiscence by Dr. Morris Lewis)	205
Osler at the Blockley Mortuary, about 1886	234

PHILADELPHIA PERIOD—*Continued* *Facing Page*

Entrance (Clinic Gate) to Philadelphia General Hospital . 235

Old Pathological Laboratory, Philadelphia General Hospital . 235

Entrance of Philadelphia General Hospital and a typical Blockley "street" as it was in Osler's time. *Photogelatin Prints* . . 236

A Page in Dr. Osler's Handwriting from Post Mortem Record, Philadelphia Hospital, dated January 7th, 1886 238

Pulmonic Valve with Four Leaflets. Pathological Specimen from one of Dr. Osler's Autopsies at Blockley 239

Interior of Library of College of Physicians—one of Osler's favourite haunts. *Photogelatin Print* 240

Former College of Physicians of Philadelphia as it was during Osler's sojourn in Philadelphia 242

Pomander Cane presented to the College of Physicians of Philadelphia by Sir William Osler 243

JOHNS HOPKINS PERIOD:

Dr. Osler during his Baltimore Period. *Photogelatin Print* . . 253

"The Four Doctors" (Halsted, Kelly, Osler and Welch). *Photogelatin Print from the portrait by Sargent* 260

Johns Hopkins Hospital, Baltimore. *Photogelatin Print* . . . 266

Dr. Osler and the Resident Staff at the Johns Hopkins Hospital, 1889 270

Johns Hopkins Hospital, 1891, Chiefs of Staff with Resident Staff 271

The "Practice of Medicine" in the making, 1891. (Dr. Lafleur) 272

Dr. Osler and Dr. Hurd with Interne Staff of 1892. *Photogelatin Print* 288

Dr. Osler and Dr. Hurd with the Class of 1898. *Photogelatin Print* 298

Dr. Osler and the Graduating Class of 1901, Johns Hopkins Hospital, (Presented by Dr. C. K. Winne, Albany, N.Y.). 310

(*a*) Dr. Osler at the third year dispensary clinic Johns Hopkins Hospital. (*b*) Quizzing a student at the Saturday morning fourth year clinic, Johns Hopkins Hospital. (*Presented by Dr. C. K. Winne for the second printing*) 311

Dr. Osler in 1905. (From a photograph by Notman, Montreal) 322

Osler at Louis' Tomb. (Enlargement from the group shown opposite page 91) 323

The Medical Building of McGill University which houses its Medical Library and will contain the Osler Library 344

The New Library Building of the Medical and Chirurgical Faculty of Maryland (contains the Osler Hall) 345

ENGLISH PERIOD:

William Osler (*Photogravure*—by permission of Dr. Camac) . . 347

ENGLISH PERIOD—*Continued*

Facing Page

Ewelme Almshouse Court Yard 368

Ewelme Almshouse and Church, Oxford 369

William Osler in the Chair of Edward Jenner. (Presented by Dr. John G. Clark of Philadelphia) 394

Sir William Osler in drawing room of the American Women's War Hospital. Paignton, South Devonshire, 1915. 410

Sir William Osler and Staff of the American Women's Hospital at Paignton 411

The Oxford Memorial Plaque near the full-length Statue of Sydenham 428

IN MEMORIAM:

The Osler Memorial Plaque in the Court of the University Museum at Oxford. (Kindness of Sir A. E. Garrod) 450

View of the Oxford Memorial showing American wreath below it and Statue of Sydenham nearby 451

Memorial Portrait Medallion. By R. Tait McKenzie 454

The Memorial Tablet to Sir William Osler in the Montreal General Hospital 456

The Dundas Rectory 457

The Doorway of the Osler Library at McGill University . . . 462

Interior of the Osler Library at McGill University 463

BIBLIOGRAPHICAL:

Page

Coats of Arms, or Seals, of Toronto, McGill, Pennsylvania, Johns Hopkins, and Oxford Universities 463

Facing Page

The interior of the Johnson Cabinets, showing fittings and contents 470

Cabinet No. 1, closed, showing exterior 471

Early Microscopic Slides prepared by Osler, from Johnson Cabinet 471

Page

Facsimile of page from Osler's first published article, "Christmas and the Microscope," Hardwicke's *Science Gossip*, 1869 . . 475

Title-page of Cartwright Lectures. (Illustrating Rubric I) . . 478

Title-page of "*Essai de Bibliographie Hippique.*" (Illustrating Rubric II.1) 481

Title-page of "Gulstonian Lectures on Malignant Endocarditis." Illustrating Rubric II.2) 501

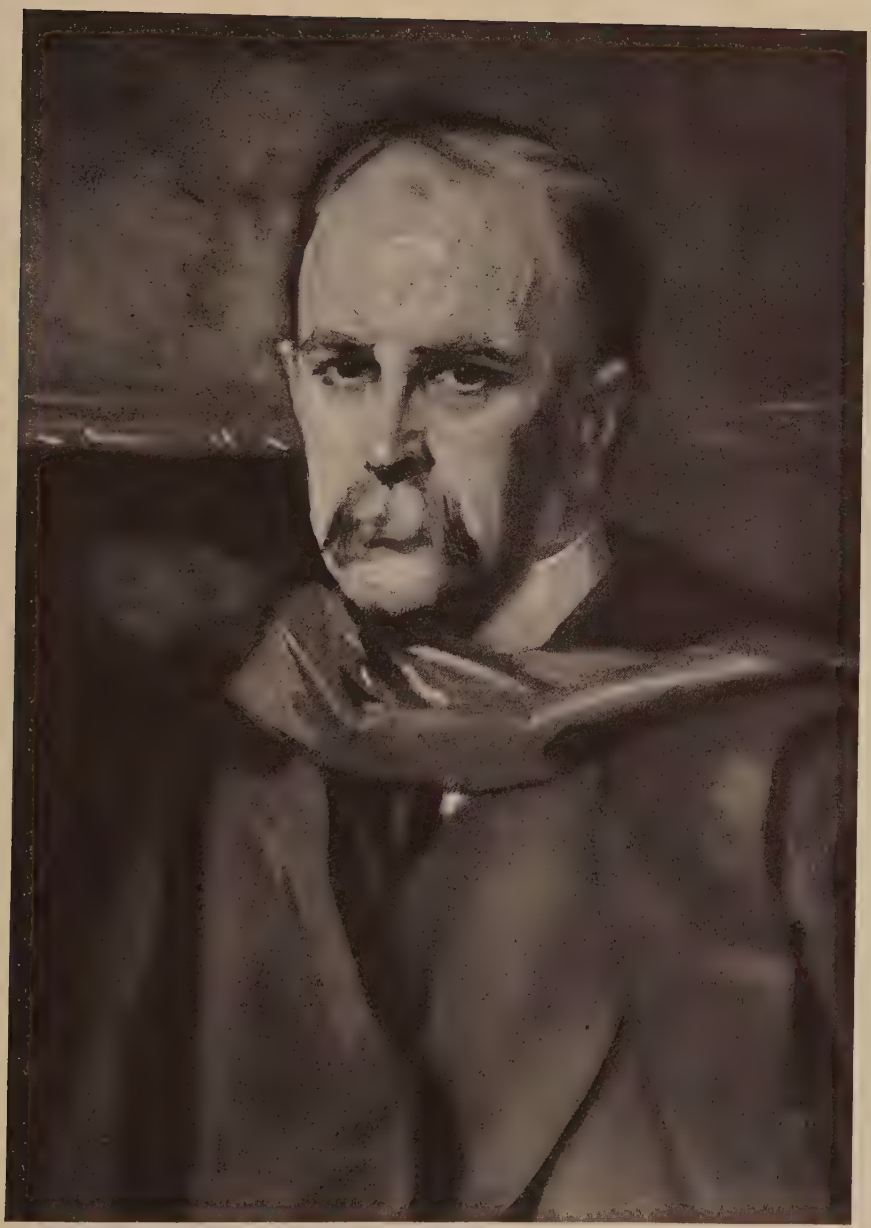
Bibliographical—*Continued*

	Page
Title-page of "Bicuspid Condition of the Aortic Valves." (Illustrating Rubric II.2)	505
Title-page of first edition of the *Practice of Medicine.* (Illustrating Rubric III)	535
Title-page of "The Ball-Valve Gall-stone in the Common Duct." (Illustrating Rubric III)	541
Title-page of "Visceral Lesions of the Erythema Group." (Illustrating Rubric III)	545
Title-page of "On a Family Form of Recurring Epistaxis." (Illustrating Rubric III)	547
Title-page of "Chronic Cyanosis with Polycythæmia and Enlarged Spleen, etc." (Illustrating Rubric III)	549
Title-page of "Chronic Infectious Endocarditis." (Illustrating Rubric III)	555
Title-page of "*Religio Medici.*" (Illustrating Rubric IV)	565
Title-page of "Thomas Linacre." (Illustrating Rubric IV)	566
Title page of Osler's first Laboratory Manual published for Students' Use. (Illustrating Rubric V)	579
Title-page of "The Medical Clinic—A Retrospect and Forecast." (Illustrating Rubric V)	589
Title-page of "Bacilli and Bullets." (Illustrating Rubric VI)	598
Title page of the first book seen by Osler through the Press	603
Title page of vol. I of first Edition of "Modern Medicine"	606

OSLER

AN eye whose magic wakes the hidden springs
Of slumbering fancy in the weary mind.
A tongue that dances with the ready word
That like an arrow seeks its chosen goal,
And piercing all the barriers of care,
Opens the way to warming rays of hope.
A presence like the freshening breeze that as
It passes, sweeps the poisoned cloud aside.
An ear that 'mid the discords of the day,
Swings to the basic harmonies of life.
A heart whose alchemy transforms the dross
Of dull suspicion to the gold of love.
A spirit like the fragrance of some flower
That lingers round the spot that this has graced,
To tell us that although the rose be plucked
And spread its perfume throughout distant halls,
The vestige of its sweetness quickens still
The conscience of the precinct where it bloomed.

Baltimore, May, 1919 W. S. THAYER



WILLIAM OSLER

Enlargement from the painting "The Four Doctors" at the Johns Hopkins University

BY JOHN SARGENT

BULLETIN No. IX

OF THE

INTERNATIONAL ASSOCIATION OF MEDICAL MUSEUMS

Sir William Osler Memorial Number

PERSONAL AND BIOGRAPHICAL

EDITED BY
MAUDE E. ABBOTT, M.D.
THE MEDICAL MUSEUM, McGILL UNIVERSITY, MONTREAL
JANUARY, 1927
(*Second Impression*)

EDITORIAL

OSLER AND THE INTERNATIONAL ASSOCIATION OF MEDICAL MUSEUMS

MY personal acquaintance with Dr. Osler began in my own pathological laboratory and museum sometime in the later nineties. He had stopped over in Ann Arbor as a guest of Dr. Dock, who, showing him the University, brought him finally into the crude quarters in which I was endeavouring to build up a department of pathology. My autopsy service, under twenty-five yearly, had in the course of several years furnished me with about two hundred museum specimens. This small collection was not passed by with hurried superiority or indifference, but was examined by him with most evident interest and sympathy. It contained some unique specimens of leukæmia and pernicious anæmia to which he reacted just as I saw him later react to a rare book. One of these was a preparation of haemolymph nodes from the prevertebral tissues of a case of pernicious anæmia. These quite excited him, because he had, as early as 1885, noted the occurrence in pernicious anæmia of lymph glands having "a rich red colour, on section looking more like spleen tissue than lymph gland."

He was much pleased to have this observation of his corroborated and explained by another worker, and after looking at the microscopical sections of these glands, and listening to my interpretation of them as haemal nodes, he shook hands with me warmly saying, "A little field well-tilled! How much more may come from it than from a large one with its surface only scratched!"

It may easily be imagined what effect this had upon the young pathologist—what encouragement and stimulus derived from such sympathetic appreciation! The memory is indelible; the glow of the reaction persists to this day. As my knowledge of the man grew, I came to know that this was Osler—the fine and ready appreciation of the work of others, and the sympathetic expressions of appreciation. In his generation of medical men there was no other one like him in this respect. How often and to how many did he send those little notes of praise and encouragement signed "Osler"! They must have influenced the development of American medicine to a degree that can never be fully realized. And who is there to take his place in this respect with the younger generation of American medical students!

Osler's interest in pathology and in the collection of specimens of disease, as shown in his early days at McGill University, and in his association with that medical museum, has been written of by others. His student days were characterized by his interest in the autopsy and the microscope; his graduating thesis was on Pathological Anatomy; and the earlier years of his professional life were occupied with the formation of the pathological collections that today constitute one of the most valued treasures of the McGill Medical Museum. In how great a degree these contributed to his later views regarding various diseases and their complications is revealed in his medical writings.

Dr. Osler had the clearest and broadest conception of Pathology as the fundamental science of Medicine. He had also the museum instinct. To him the pathological specimen, properly prepared and catalogued, was a record of dis-

ease more instructive than any text-book description could possibly be. He valued rare specimens as he valued rare editions. Each had a wonderful beauty of its own—valuable in that it demonstrated some essential bit of knowledge of disease for which it should be preserved as an individual record. He had the feeling of the old-time naturalist for these specimens. He loved to look at them, comparing and contrasting, seizing upon their individual points, and correlating these with the clinical symptoms produced by them. He knew, moreover, how to describe them in such a telling way as to excite interest in the most apathetic of medical students. The pages of descriptions of the pathological specimens catalogued by him during his Montreal years bear eloquent witness to his enthusiasm for this branch of medical teaching; and this enthusiasm of his earlier years of pathological training never left him. Indeed, it constituted one of the most important factors of his success as a teacher of internal medicine, and it gave to his text-book that individual flavour, which made it unique.

It was to be expected then that Dr. Osler would be sympathetic with the aims of the International Association of Medical Museums. He was much more than that; he showed great enthusiasm over the plan for its foundation, and aided the charter members in every possible way. He believed there was a great need for such an association. He deprecated the neglect of museum development and museum teaching shown by so many medical schools, particularly those in the United States, during the first decade of the twentieth century; and he believed that a museum association could stimulate and reawaken such interests. At its foundation in 1907, he was made its first honorary member.

On May 13th, 1911, Dr. Osler called a meeting of British medical men interested in medical museum work, at the Royal College of Surgeons in London, for the purpose of organizing a British branch of the Association. As a result of this meeting all the medical men present became members of the Association. Plans for co-operation with

the Pathological Society, the Anatomical Society and the Royal Society of Medicine were adopted, and for the meeting of the Association in conjunction with the International Congress of Medicine to be held in 1913. These plans resulted in a most successful meeting at this Congress. Dr. Osler used all of his influence to advance the cause of this association and at the London meeting spoke at length of its aims and possibilities, prefacing his remarks with a tribute to the memory of Sir Jonathan Hutchinson, as "a pioneer worker in the field of medical museums, a collector in the most scientific sense, and a demonstrative teacher of the highest type." Dr. Osler further urged the establishment and endowment of such popular museums as the Hutchinson Museum at Haslemere. He further emphasized his belief that there was a field and a definite need for an Association that would occupy itself with the presentation of the methods of museum technique and demonstrative teaching. These important matters did not receive sufficient consideration in other societies, and he believed that an International Association for the exchange of museum material, and for a discussion of museum methods was a practical one, and should be carried out.

Such plans were actually perfected at this meeting, and the International Association of Medical Museums reached its high-water mark as an international organization during the following year with local sections in nine countries and two hundred and sixty-two members scattered throughout the entire civilized world. Then came the War, and with it vanished in a large degree the international character of our association. It has survived actively only in Canada and the United States. During all of these terrible years Dr. Osler's interest never abated. The appearance of Bulletins IV, V, VI and VII brought from him each time congratulatory notes, and the hope that the Association would survive the great disaster to assume once again its international character and be a means of reuniting the severed relations of medical teachers and scientists

throughout the world. Ill himself, sorrowing and anxious, he, nevertheless, found time, not long before his death, to write "What a splendid thing your Special War Bulletin is!"

The Association has lost its strongest friend! Is it not our part to take up the work again and place it where he hoped to see it—once more an International Association for the advancement of peace and knowledge.

ALDRED SCOTT WARTHIN,
Ann Arbor, Michigan.

OSLER AND THE MEDICAL MUSEUM

IN recalling the services rendered by the late Sir William Osler for Medical Museums, please give this instance a place. He was the moving force which led to the formation of an Imperial Collection of Medical Specimens during the late War. He pulled the handle which set the collecting machine in motion. The Director General of the Army Medical Service, Sir Alfred Keogh and his Colleague with the Army in France, Prof. T. R. Elliott, Prof. Shattock, Mr. Beadles and myself were parts of that machine. Sir William Osler had a passion for original documents. Specimens are original documents; the most accurate of descriptions and drawings are at the best but second-hand records, they are but reflections of the minds which wrote or made them. He saw, at the outset, the importance of having the medical history of the great War recorded in original documents, and knew the right strings to pull to set the collecting machine in motion, and then having seen it started, he gave his attention to matters more directly concerned with the welfare of wounded and sick soldiers.

I may here also place on record, some other impressions I formed of him, for he came often to the Museum of the Royal College of Surgeons. He was, as all really great medical men are, an enthusiastic and understanding worshipper of John Hunter. There was one particular specimen of Hunter's he never ceased to be excited over:—a piece

of small intestine from a hog, studded with air cysts; it was sent to Hunter by Edward Jenner, and the gaseous contents of the cysts were analysed by Henry Cavendish. The specimen links three great names together.

Osler's own body and brain were live museums. His body—of but medium stature, but ever active—his dark sallow complexion, hair which had been black, but now turning grey, his ample head of the long type; all these are the traditional characteristics of the man of the South—the Mediterranean type of man. He was Cornish, with live Celtic fires ever ablaze in his brain. He saw so deeply into life that he felt the humour of it. There was much of the Will-o'-the-Wisp about him; you put out your mental hand to catch him, as it were, and before you could touch him he was gone. Never a man masked, so successfully, earnestness of purpose and a real love of his fellowmen with a glimmering veil of humour. He was most in earnest when he was most in fun.

A future generation will never understand the love which Osler's own generation lavished on him, and the respect in which it held him. He was an outstanding figure in the medical life of his time, but it was not what he did for medical progress that made him great and loved. He was really great and truly loved, because his qualities and abilities made him the central pivot round which the social medical life of two continents turned; it was through him that the international medical wheels turned with an easy movement. By his death the central pivot may be said to have fallen out; this is why his passing from among us has made such a difference in the professional lives of all who work for the progress of our calling, and why it has left a blank—a *felt* blank—in medicine in this country, greater than has resulted from the passing of any other man in my time.

ARTHUR KEITH,
Royal College of Surgeons of England.

OUR DEBT

LEADERSHIP in science marks progress. The art and science of medicine of to-day are the richer because of Osler; not because he has left us with just one more instrument to war against the enemies of health, nor because he has made an individual discovery upon which he could rest his reputation for the leisure of the passing years, but because there was the man glowing with the ideals of a greater medicine, and constantly striving to implant the enthusiasm for work and new knowledge into all of his students and associates.

Sir William Osler was a leader in medicine, the like has not occurred for many generations. He was more than a leader, for his influence had a richer personal touch, often a fatherly interest, whether in praise or criticism. He was equally at home upon the uncomfortable benches before a laboratory table as in the Hospital ward or beside the rich man's bed. He found interest in all topics relating to disease or its history. He enjoyed the company of young men and appreciated the value of comforting words and anecdote to the aged. All such does not constitute leadership or greatness, and we fail to find an appropriate word in the English language descriptive of the many qualities which have placed him amongst the Masters of Medicine. He was an incomparable teacher, a close student of clinical medicine, a laboratory worker and a guide in the pathway of many students. There is no phase of medical practice or of medical education in which he was not interested or in which he played no inconsiderable part during his lifetime.

His interest in the work of Medical Museums was particularly brought home to me upon the occasion of his visit to Montreal in 1905, shortly before the disastrous fire at McGill. He spent morning after morning reviewing many preparations which he himself had collected more than twenty-five years previously. His memory of each was as

clear as if it had been obtained yesterday, and he delighted the group who were accompanying him by reciting the clinical data which had made the case an interesting one for study. Many of these specimens had been put on record by him either in Journals or text-books, and he astonished his audience by giving the references of the publications in year, volume and even page.

This Association was very fortunate in having the enthusiastic support of Sir William Osler, during the early years of its life, when its future was none too well assured, and at a time when some were unwilling to admit its value and the part it would play in the advancement of medical education. Sir William appreciated the need of an organization which would permit the interested groups to exchange ideas and which would assist in developing the teaching value of well established Medical Museums. His assistance to the Association was more directly through personal contact with the individual members than by attendance at the meetings of the Society. But all will recollect the encouragement which he so freely lent us, and on more than one occasion, the material assistance which made our existence possible.

OSKAR KLOTZ,
University of Toronto.

OSLER—ÉDUCATEUR

L'ASSOCIATION des musées médicaux internationaux m'a fait l'honneur de m'inviter à associer mon hommage à ceux que rendent à la mémoire de Sir William Osler, les hommes qui l'ont connu et dont il avait conquis l'affection et l'admiration par la simple vertu de son charme naturel.

Il ne m'appartient pas de parler du savant, non plus que du médecin éminent que tous ont apprécié. On sait aussi qu'il fût un Professeur remarquable.

C'est un autre de ses mérites que je voudrais rappeler, un mérite bien rare et d'une valeur inappréciable.

Sir William Osler fut un merveilleux ÉDUCATEUR. Je veux parler ici de cette éducation de la jeunesse médicale, si précieuse, si indispensable à l'honneur, à la dignité de notre belle profession, dignité dont nous tous Médecins, quelle que soit notre Patrie, devons être les gardiens et les garants vis à vis l'Humanité tout entière.

Sir William Osler possédait au plus haut degré toutes les qualités nécessaires pour remplir ce rôle d'Éducateur.

Son penchant naturel à regarder les choses, de haut et d'un point de vue philosophique, ses importants travaux scientifiques, et par dessus tout sa grande valeur intellectuelle et morale, lui conféraient une autorité incontestée dont il faisait un noble usage en donnant libéralement, dans ses remarquables "addresses", les conseils que lui dictaient son expérience, sa sagesse, sa profonde connaissance de l'âme humaine, et sa grande bonté.

Sir William Osler fût non seulement un grand médecin, mais aussi créature d'élite. Nous l'avons tous admiré et aimé.

PIERRE MARIE,
Sallenelles, Calvados, France.

OSLER AND ENDOCARDITIS AND MYCOTIC ANEURISM

SIR William Osler was always deeply interested in diseases of the heart and vessels and especially in the infectious conditions and in all varieties of aneurisms. As early as 1880, he published a case of endocarditis and meningitis following pneumonia. In 1881[1], he contributed a paper on "Infectious (so-called ulcerative) endocarditis". In the same year, there appeared in the Canada Medical and Surgical Journal,[2] a communication, in association with Dr. Molson, dealing with a case of chorea with recent endocarditis. A larger discussion of the subject of endocarditis was presented at the International Congress[3] held in London, in 1881.

His most important work on endocarditis is contained in his famous Goulstonian Lectures,[4] delivered in 1885. These lectures were based upon a study of over 200 reported cases, and a considerable experience of his own at the Montreal General Hospital. There is nowhere else in the literature such a masterly exposition of the pathology, clinical picture, and diagnosis of endocarditis. It contained all that was known of the subject, written in such a compact, but clear way, that it is necessary to read it over and over again, if one wishes to learn its contents thoroughly.

In these lectures, there are many remarkable original observations. He points out that the disease is not always ulcerative, and draws attention to the healing processes in the depth of the lesions of even the acute form of the disease, and to the deposition of lime in vegetations. The etiological consideration is a very full one.

After stating that it is rare for vegetations to extend to the arch of the aorta, he describes a case of "ulcerative

1. Archives of Medicine, New York, 1881, v, 44-68.
2. Canada Medical and Surgical Journal, Montreal, 1880-1881, ix. 650-652.
3. Transactions International Medical Congress, London, 1881, i, 341-346.
4. British Medical Journal, 1885, i, 467, 522 577, 607.

endocarditis" involving the arch and producing multiple aneurisms. He correctly recognized this condition as a mycotic endarteritis, and thereby described the first case of mycotic aneurisms. Tufnell (1853) and Ponfick (1873) had described cases of embolic aneurism which they considered due to impact on the walls of vessels by bits of calcareous material thrown off from the valves of the heart. Eppinger's studies on mycotic aneurisms appeared three years after Osler had made his properly interpreted observation.

At the time of the delivery of the Goulstonian Lectures, Osler had not met with any cases of the chronic (now called subacute) type of infectious endocarditis. He noted the condition, however, and referred to the observations of Wilks, Bristowe, Coupland, and Lancereaux.

In 1893[5] he reported two cases of "The Chronic Intermittent Fever of Endocarditis." In this paper, he draws attention to the main features of what is now known as subacute bacterial endocarditis. In 1908[6], he described the ten cases which he had observed since delivering the Goulstonian Lectures. This contribution attracted wide attention. He characterizes these cases as "not marked especially by chills but by a protracted fever, often not very high, but from four to twelve months duration". It is not possible in this short note to detail all of the important observations that Osler recorded in this publication, and the remarkable inferences that he drew. Of particular interest is his note on the involvement of the chordae tendineae and the endocardium of the left auricle.

The most important observation which he makes concerns the cutaneous manifestation which now carries his name. His attention was first called to this manifestation by Dr. Mullin of Hamilton, Ontario, whose splendid description is cited. He states that the symptom was known to the French, who termed it "*Nodosités cutanées éphémères.*" In a paper published in the Interstate Journal of

5. Practitioner, 1893, l, 181-190. One of these cases was studied by Mullin.

6. Quart. Jour. Med., 1908-1909, ii, 219-230.

Medicine[7] in 1912, in which he describes a case of "chronic infectious endocarditis" with an early history like splenic anemia, Osler again speaks of these lesions and states that he believes them to be pathognomonic[8]. It was F. Parkes Weber who, in 1913[9], wisely suggested calling these lesions "Osler's spots", and "Osler's symptom", because "it was Osler who had first called general medical attention to their full diagnostic importance and had distinguished them from the ordinary purpuric eruptions not rarely met with in cases of malignant endocarditis". The present writer is in the habit of making use of the term "Osler nodes".

Much more could be written concerning the studies of endocarditis made by Osler. It is an honor for me to be privileged to write what I have concerning this great man and physician, at whose hands I was the recipient of much inspiration and stimulus, and many important kindnesses.

E. LIBMAN,
New York.

OSLER AND PATHOLOGY

OUR interest in the early period of Sir William Osler's life is more than that naturally felt in what may be termed the first formative years in the life of a great man. For he stands very close to the hearts of us all as the cardinal influence in medicine of our time, and the annals of his boyhood and those of the Universities (Toronto, McGill and Pennsylvania) which knew him in the virgin days of his first incursions into the field of natural science and in the full flood of the activities of his early manhood, should stand to the present generation in medicine as an open book, which all who run may read. A youth passed under the influence of such an excellent teacher and broad-minded man as Dr. Johnson, of Weston, might have formed the

7. 1912, xix, 103-107.

8. The present experience coincides with this view except for their rare occurrence in the so-called atypical verrucous endocarditis.

9. Quart. Jour. Med., 1913, vi, 384-390.

basis for a life devoted either to the arts or the sciences. Fortunately for us and for the medical world, in his case both arts and sciences held their place and were keenly appreciated and understood. His career is of interest to anyone who takes life seriously, but especially to pathologists, first because Sir William did a great deal for and with the pathology of his time, and next because pathology did a great deal for Sir William. He, more than any man whom I have known, had the ability to look beyond the gross and even the detail of pathological lesions, and apply them to the living. Thus, however great his interest was in the disease, as, for instance, in one of his pet diseases, aortic aneurism, however much he understood and appreciated the basic lesion that led to the gradual dilatation of the aorta, the formation of the laminated clot and the anatomical changes that might take place in this condition, he saw far beyond these—they meant to him also a brassy cough, a tracheal tug, a contracted pupil, and the excruciating pain to the patient that is associated with erosion of the vertebrae. His interest was in unfortunate and suffering humanity, and he used pathology as well as all the other branches of medicine in the interpretation of clinical signs and symptoms,—the prognosis and treatment of disease.

At a time when the facts of pathology were still unfamiliar ground to the great majority of his fellows and when few knew the use of the microscope, Dr. Osler united to an intimate knowledge of the external features of disease and death, born of incessant and unwearying personal investigation, an intensely sympathetic and vital sense of the realities of life. It was this combination, his grasp o the underlying pathological lesion in all its details and significance, and his entire understanding of what these things meant and connoted in the great complex of the living organism and in the consciousness of his patient, that made him the greatest clinician of our day.

LAWRENCE J. RHEA,
Montreal, Canada.

THE DUTY OF THE DISCIPLE

*"In the teacher I have always valued the message of the life above the message of the pen—"**

THUS wrote the master, when he was yet among us and while it was still possible to feel, by personal contact, the inspiration of his life. Now the message of that life must be had through the medium of his pen, from which flowed such a vast treasure of counsel and encouragement. Yet there is another and more vital channel by which that "message of the life" may be conveyed. His disciples may tell of the works and influence of the master and in turn the later hearers may bear the tidings, till that spirit, known first to a comparatively small group of pupils and intimates, becomes an unquenchable torch to light the way traveled by pilgrims innumerable.

It is not the toil, the struggle, the heartache, nor yet the doctrine or creed that lives—they pass. Ideals, principles, and deeds, vitalized by the love for one's fellow-men, live on, as man's immortal self, ever reincarnated in the lives and teachings of his disciples.

So far as we know, the great Teacher of Galilee wrote but one sentence and that was traced in dust, to be soon trodden down and scattered. Yet the spirit of His life has been transmitted, through the centuries, in the lives of His disciples and by their record of His ideals, principles and deeds.

Stirring as are the writings of Osler, it may however be noticed that those who did not know him, fail to catch, from his written word, the inspiration that came from the man himself. It is the fate of all written record, unless the disciple transmit the *personal* message.

---

*From holograph letter, by Sir William Osler, which appeared as Frontispiece to first and second editions of "Counsels and Ideals from the Writings of William Osler," Oxford Press, London and The Riverside Press, Houghton, Mifflin & Co., Boston.

In the administration of hospitals and institutions of learning, in the establishing of museums and libraries, in methods and systems of instruction, many are fulfilling the message of his pen and thus rearing worthy memorials to his influence upon medical progress, and yet there is the greater message—the touchstone by which all these shall operate effectually—the simple, daily, personal interest in and understanding of the *individual* pupil and fellow-worker; his needs, his limitations, his aspirations, his possibilities, his trials—the exact measure of the man and a wholesome, sympathetic knowledge, usually unexpressed in words, of his conflicts and obstacles.

Few indeed are gifted with his charity, but none is so insensible as not to have felt the courage and strength which it imparted and, having known its power, few will dare withhold what little they may be able to impart.

In all the splendid efforts, in many parts of the world-to perpetuate in tablet and monument, the memory of the great teacher in medicine, I seem to hear a still, small voice, bearing "*The Message*" of his life—an imperishable monument, to be ever in the making by his disciples—a monument to "the greatest of these" which abideth and without which all else "profiteth nothing."

C. N. B. CAMAC.

SIR WILLIAM OSLER ALS VERKÜNDER DER INTERNATIONALEN MEDIZIN

DIE Aufforderung der Herausgeberin, einen Beitrag zu diesem Erinnerungsband an William Osler zu liefern, erreichte mich erst auf meiner Heimreise nach Deutchland.

Während ich,—losgelöst von allen Beziehungen zur wissenschaftlichen Welt,—wie ein Einsamer den Ozean durchquere, nichts anderes als Wasser um mich und den Himmel über mir, denke ich zurück an die Tage und Stunden, in denen ich mit Osler zusammen sein durfte; denke ich an den gesamten Eindruck, den diese Persönlichkeit auf mich gemacht hat. Mit zwei Worten ist es gesagt: den Eindruck weitumfassenden Wissens und den Eindruck grenzenloser Güte. Wer die Geschichte der Medizin kennt, weiss wie selten die Persönlichkeiten sind, in denen sich der Forscher und der Mensch zum harmonischen Bilde des wirklich grossen Arztes vereinen. Gerade die moderne Medizin mit ihrem fast unnatürlichen Hang zur Spezialisirung, mit ihrer fast unheimlichen Vielseitigkeit der Technik braucht noch mehr wie in früheren Zeiten solche Vorbilder, in denen sich unser Wissen und unsere Kunst auf dem Hintergrund einer besonderen Anlage des Gemüts im Arzt verkörpert. Seit Hippocrates hat die Medizin aller Völker einzelne solcher Vorbilder aus sich hervorgehen lassen. Ihre Gestalten ragen über die Jahrhunderte und ihre Wirkungen messen sich an Generationen.

In die Reihe dieser grossen Aerzte wird für alle Zeiten Sir William Osler gestellt werden. Der anglo-amerikanische Kulturkreis kann stolz sein auf diesen seinen Sohn. Ich brauche die Universalität des medizinischen Wissens, über welche William Osler verfügte, nicht zu schildern. Wer seinen Lebenslauf genauer verfolgt hat, der weiss, wie eingehend Osler die theoretischen Fächer studirt hat, die seiner Zeit die

Grundlage der klinischpraktischen Tätigkeit bildeten. Noch heute hütet das pathologische anatomische Museum der McGill Universität als einen besondern Schatz die Präparate, die Osler als Prosektor des Hospitals nicht nur gesammelt, sondern auch sorgfältig beschrieben hat. Was aber jeden erstaunen musste, der mit Osler persönlich zusammen kam, das war seine besondere Gabe, auch auf den dem Kliniker ferner liegenden Gebieten das Wichtige vom Unwichtigen unterscheiden zu können. Das war das Ergebniss seiner umfassenden Schulung, seiner Universalität. Als ich die Freude hatte, William Osler als meinen Gast in Marburg bei mir zu sehen, war seine genaue Orientirung über die Probleme, welche in dem neuentdeckten Reizbildungs-und Reizleitungssystem des Herzens steckten, für mich das Ueberraschendste. Man fühlte sofort, dass hier ein Kliniker sprach, der nicht nur funktionell, sondern auch morphologisch zu denken verstand. Das zeigte sich auch bei allen andern Gesprächen. Nur wenige Menschen besitzen diese Gabe glücklicher Synthese beider Vorstellungensarten. Seine Universalität spiegelt sich auch wieder in den von ihm geleiteten Handbüchern, in seinem Lehrbuch, in seinen zahllosen, alle Seiten der Medizin umfassenden Publikationen, in seiner grossen Hochachtung vor der Geschichte der Medizin.

Ebenso tief war der Eindruck, den man von der menschlichen Seite William Osler's empfing. Es war die Güte, jener besondere Ausdruck der menschlichen Seele, die ihr am tiefsten den Stempel des Göttlichen aufdrückt. Von solcher Güte war das Wesen William Osler's erfüllt. Und jeder empfand sie, der in seiner Nähe kam. Uns selbst war das mehrfach vergönnt. Wieviel mehr musste es auf diejenigen wirken, die täglich mit ihm zusammen sein durften.

Diese Universalität des Wissens und diese Güte des Herzens machten William Osler auch zu dem berufenen Verkünder der übernationalen Werte der Medizin. Ich werde seine Abhandlung über Medizin und Nationalismus nicht vergessen. Ich

bekenne mich zu dem Glauben eines William Osler, dass die Medizin, so national sie auch in ihren Forschungen geprägt sein mag, in ihren Ergebnissen der Kultur und Zivilisation aller Völker zu dienen hat. Ich als Deutscher, der ich von dem Wert der eignen Wissenschaft durchdrungen bin, huldige den Manen eines William Osler, der einer der grossen Brückenbauer auf dem übernationalen Gebiete der Medizin war. Er hat hier Werke aufgebaut, die auch der Krieg nicht zerstören konnte. William Osler gehört der Medizin der Welt.

J. LUDWIG ASCHOFF,
Freiburg, Deutschland.

The English translation of the foregoing tribute is as follows:

SIR WILLIAM OSLER, AN APOSTLE OF INTERNATIONAL MEDICINE

THE request of the editor to supply a contribution for this memorial volume only reached me on my return voyage to Germany.

While I—cut off from all associations with the scientific world—like a lonely man, am crossing the ocean, with only the waters around me and the heavens over me*, I look back upon the days and the hours which I was permitted to spend with Osler; I recall the entire impression which his personality made upon me. It may be summed up in two phrases: wide knowledge, and boundless kindness. Whoever follows the history of medicine appreciates the rarity of such personalities, in whom the investigator and the man are united in the harmonious picture of the truly great physician. Modern medicine, especially, with its almost unnatural tendency toward specialization, its almost alarming many-sidedness of technique, needs, even more than in former times, such characters, in which medical knowledge and medical art are combined in the physician on the basis of a special refinement of spirit. Since Hippocrates, medicine of all nations has evolved isolated personalities of this kind. Their figures tower over the centuries and their influence is measured by generations.

Within the ranks of these great physicians Sir William Osler will hold a place for all time. The cultured world of the Anglo-American

* Written on the author's return journey from Japan.

peoples may well be proud of him, its son. I do not need to describe in detail the universality of medical knowledge which William Osler commanded. Whoever follows his life will know how thoroughly Osler studied those theoretical branches which, during his time, supplied the foundation of practical clinical medicine. Down to the present day the Pathological Museum of McGill University treasures the specimens which Osler collected as Prosector in the Hospital, and which he carefully described. But what astonished one most in personal association with Osler, was his rare gift of distinguishing the important from the unimportant, even in fields which were outside that of the clinician. This was the result of his broad training, of his universality. When I had the pleasure of entertaining Osler as my guest in Marburg, I was most impressed by his exact orientation in the problems of the, then newly discovered, system of origin and conduction of impulses in the heart. It was at once apparent that a clinician spoke who understood how to think, not only functionally, but also morphologically. This was also evident in his other conversations. Few men possess this gift of happy synthesis of both kinds of conception. Again, his universality is mirrored in the works which he edited, in his own textbook, in his numerous publications dealing with all sides of medicine, in his great esteem for the history of medicine.

Equally deep was the impression gained from the human side of William Osler: It was kindness, that particular expression of the human soul which impresses most deeply upon it the stamp of the divine. Such kindness permeated the character of William Osler. Everyone who approached him felt it. We ourselves have had this experience several times. How much more must it have affected those who came in daily contact with him.

This universality of knowledge and this goodness of heart made William Osler the born prophet of the values of medicine beyond national bounds. I shall never forget his essay on "Medicine and Nationalism." I——declare my adherence to this, the faith of a William Osler: that medicine, national as it may be in the moulding and coining of its researches, has to serve, by its results, the culture and civilization of all nations. I, a German, deeply convinced of the value of our own culture and science, do reverence to the shades of a William Osler, who was one of the great bridge-builders in the field of medicine beyond all national boundaries. Here he produced works which the war itself could not destroy. William Osler belongs to the medicine of the world!

OSLER'S GIFT TO THE STUDY OF MEDICINE

PROBABLY no writer in medicine has contributed so much to the task of bringing the study of this Art to a scientific orderly form, as has Sir William Osler.

Raised in a devoutly religious family, the son of a fervent Anglican missionary, who had reared this, his youngest son of nine children with a view to placing him in the ministry, the boy grew into manhood in a God-fearing atmosphere that gave to his bedside manner an almost beatific kindliness, and tenderness.

With this religious background it is not surprising, that Osler should bring to medicine heaven's first law, order. Schooled under Virchow, the greatest pathologist of his time, at a time when this branch of medicine was making some of its greatest advances, and in that plastic period just after his graduation, it is easy to understand why the pathological pattern is so closely woven into his work.

Not only has this always deeply influenced the manner in which he approached all of his medical researches, but it always remained regulated to its proper plane, that of providing the law of cause and effect for his work at the bedside. Unlike many who follow the didactic pursuits of normal and morbid anatomy, he never allowed their academic discussion to subordinate their usefulness to his clinical work.

Driven by a hunger for knowledge, he followed all of his studies of puzzling cases to a final proving, not for pique nor for self-satisfaction, but to be better armed for his future tilts with disease. That he might gain every shred of information from his cases, he so tactfully requested permission for autopsies, that he was rarely refused. These he often performed with his own hands, in the days before typewriters and stenographers, writing out in his own script the most complete details. This orderly habit of mind which made him pursue to the end a line of thought, had much to do with the reduction of

the knowledge of each disease to a scientific topical form in his writings.

This orderly arrangement has enabled the modern student of medicine to apply to this study the logical sequence of thought that has been used in the more exact sciences, and removed much of the slovenly teaching habits of former times.

In an introductory address at the opening session of the McGill Medical School in 1877, described by Dr. H. B. Small of Ottawa as his first public address, he advised the students of the necessity of system in their work saying: "Let me add a word of advice on the method of studying. The secret of successful working lies in the systematic arrangement of what you have to do, and in the methodical performance of it." It is seen that this principle of an orderly system for the study of medicine, was in his mind at the beginning of his career, and every year grew stronger till it dominated all of his work, and culminated in his *Practice of Medicine*, the greatest instrument of our time for the reduction of the study of this Art to a logical scientific basis.

It is a notable fact that Osler started his clinico-pathological demonstrations as a part of his course in physiology, since it is probably the chemical advances in the physiology of the blood stream, that have caused the present day rise in the popularity that gross and cellular pathology are enjoying.

The early religious training, the application of true Christianity to his daily work, where a great heart filled with human sympathy, coupled with a great mind stored with those facts which only infinite labour and patience may gather, made the man Osler not only a great physician, but a true healer.

JAMES F. COUPAL,
Washington, D.C.

SIR WILLIAM OSLER IN ROMA

THE face of Sir William Osler has remained alive in my memory; in it was the expression of penetrating intelligence, tenacious will power, and enthusiasm for the true and for the good.

I knew him, before seeing him in person, in some of his writings. I remember his work on *angina pectoris* and his exhaustive discourse on *endocarditis*, which was cited by me in one of my contributions to the study of this disease.

I had the pleasure and honor of seeing him in Rome, where he came twice while he was Professor at the University of Oxford, after a life of laborious and fruitful work in American Universities; the second time that I met him was in April, 1912, in the year in which the International Congress of Tuberculosis was held at Rome at the mausoleum of the Emperor Hadrian, on the banks of the Tiber, near the hospital of Santo Spirito which he visited. The glorious story of this ancient hospital, founded in the VIIth century, was known to Wm. Osler, also the names that have come down to us in history of the physicians who made it famous; Eustachi, Malpighi, Baglivi, Lancisi, Pacchioni, and then

LA figura di Sir William Osler è rimosta viva nella mia memoria: in essa era l'espressione della intelligenza penetrante, della volontà tenace, dell'entusiasmo per il vero e per il bene.

Io lo conosceva, prima di vederne la persona, in alcuni dei suoi scritti: ricordo il suo lavore sull' angina pectoris *e quello sulla endocardite a lungo decorso, da me citato in un mio contributo allo studio di questa malattia.*

A me fu dato il piacere e l'onore di vederlo a Roma, ove egli venne due volte, quando era già professore nella Università di Oxford, dopo una vita di forte e fecondo lavoro nelle università americane; la seconda volta fu nell' aprile del 1912, nell' anno, nel quale si tenne a Roma il Congresso internazionale della tubercolosi nel mausoleo dell' imperatore Adriano, sulle sponde del Tevere, presso l'ospedale di Santo Spirito, che egli visitò. Di questo antico ospedale, fondato nel VII secolo, W. Osler conosceva la storia gloriosa e i nomi, rimasti nella storia, dei medici, che lo hanno illustrato; cioè, Eustachi, Malpighi, Baglivi, Lancisi, Pac-

Columbo and Cesalpino, who were among the first to make known to us the circulation of the blood.

Within the Library of the Hospital of S. Spirito, founded by G. M. Lancisi, and therefore called Lancisian, W. Osler has several times left his name in writing (4 times in February 1909 and once in April 1912), in the book in which the reader writes his name and the titles of the books he wishes to consult. In April, 1912, under the signature of W. Osler will be found, fastened with a pin, one of his cards

Sir William Osler
13 Norham Gardens.

Among the books consulted by W. Osler, as found noted under his name, are those of G. M. Lancisi, of Eustachi, of Pacchioni, of Redi.*

I have read in a biographical sketch of Sir William Osler† that he desired as his epitaph the words *"He taught medical students in the wards"*. In this ideal he had as his fore-runner G. M. Lancisi, that physician of the hospital of S. Spirito in the 17th century, who used to say that young physicians could not be good practitioners, *"nisi multos annos publica adierint*

*On these visits to the Lancisian Library he was accompanied by my friend Professor Giuseppe Bastianelli.

†*British Medical Journal*, 2, 1, 1920.

chioni, e poi Colombo e Cesalpino, che furono i primi a far concosere la circolazione del sangue.

Nella Biblioteca dell' ospedale di S. Spirito, fondata da G. M. Lancisi, detta però Lancisiana, W. Osler ha lasciato scritto piu volte il suo nome (4 volte nel Febbrajo, 1909, e 1 volta nell' Aprile, 1912) nel libro, ove i lettori mettono il loro nome e scrivono i titoli dei libri che vogliono consultare. Nell' aprile, 1912, sotto la firma di W. Osler, si trova appuntato con uno spillo un suo biglietto:

Sir William Osler
13 Norham Gardens

*Fra i libri consultati da W. Osler e che si trovano notati sotto il suo nome, sono quelli di G. M. Lancisi, di Eustachi, di Pacchioni, di Redi.**

Ho letto in una biografia di Sir William Osler† che egli desiderava un epitaffio nel quale si dicesse "he taught medical students in the wards"; *ora egli ebbe precursore G. M. Lancisi il quale, medico dell' ospedale di S. Spirito nel Sec. XVII, soleva dire che i giovani medici non potranno essere mai buoni pratici,* "nisi multos annos publica adi-

**Nelle sue visite alla Biblioteca Lancisiana fu accompagnato dal mio amico Professore Giuseppe Bastianelli.*

†*British Medical Journal*, 2, 1, 1920.

nosocomia, in quibus infirmi omnis generis fere semper occurrunt, atque eorum lectis crebro, diuque assiderint."

W. Osler gave utterance to a doctrine of profound significance when he said that he attributed a great deal of his clinical success to the fundamental studies which he carried out as pathologist in the University at Montreal,* where his colleagues in the great hospital of that city placed at his disposal the performance of the autopsies, and thus pathology became his chief occupation. He understood the importance of pathological anatomy as one of the foundations of medicine, thus agreeing with the judgment of G. B. Morgagni.

In Rome W. Osler wished to visit the large hospitals, the clinics and the scientific Institutes. At the Policlinico Umberto I, where he was accompanied by Prof. Guiseppe Bastianelli, he was interested in the work on osteomalacia of Prof. Uberto Arcangeli, with whom he had a long discussion on this subject. At the Pathological Institute he was received by me and by Prof. A. Bignami. He was already fully aware of the studies upon malaria made in Rome and was eager to see microscopic preparations of the blood and of the

*(McGill University).

erint nosocomia, in quibus infirmi omnis generis fere semper occurrunt, atque eorum lectis crebro, diuque assiderint."

W. Osler ha lasciato un profondo insegnamento quando disse che egli attribuiva molta parte del suo successo nella clinica agli studi fondamentali da lui compiuti come patologo nella Universita di Montreal, ove i suoi colleghi del grande ospedale di quella città, misero a sua disposizione il reparto delle autopsie e cosi la patologia divenne la sua precipua occupazione. Egli comprese la importanza dell'anatomia patologica come uno dei fondamenti della medicina, conforme al giudizio di G. B. Morgagni.*

In Roma W. Osler volte visitare i grandi ospedali, le cliniche, e gl'istituti scientifici. Nel Policlinico Umberto I, ove fu accompagnato dal Professore Giuseppe Bastianelli, s'interessò dei lavori sulla osteomalacia del Professore Umberto Arcangeli, con il quale ebbe un lungo colloquio sull' argomento

Nell' Istituto di Patologia fu ricevuto da me e dal Professore A. Bignami. Egli conosceva già gli studi sulla malaria fatti in Roma e desiderò di vedere preparati micro-

*(McGill University).

organs in cases of the pernicious type, and he observed with great interest preparations of brain with blood vessels distended by red cells containing the plasmodium of the tertian malignant form, almost all in the phase of multiplication.

I wish to record an episode of the second visit to Rome of W. Osler, an episode which demonstrates the high and delicate sense of responsibility and of professional *esprit de corps* of the illustrious clinician. He had visited in a hotel of the city, in consultation with an eminent English physician, a gentleman visiting Italy who presented the symptoms of purpura hemorragica in a very grave form. Some hours after the consultation Prof. Osler left for Florence and learned there that in that city and elsewhere, cases of small-pox had been discovered; he immediately sent to the English physician at Rome a telegram, in which he told him to be careful and to consider, in the patient whom they had seen in consultation, the possibility of a purpuric small-pox. In this action, which he believed necessary under the circumstances, W. Osler recalls to mind the lines from Dante:

"O most exalted and pure conscience!"

I remember another consultation which Prof. Osler held with Prof.

scopici di sangue e di organi in casi di perniciosa e osservò con molto interesse preparati di un cervello con i vasellini sanguigni distesi da globuli rossi contenenti i plasmodi della terzana maligna, quasi tutti nella fase della moltiplicazione.

Voglio ricordare un episodio della seconda visita in Roma di W. Osler, episodio, che dimostra l'alto e delicato sentimento di responsabilità e di collegialità dell' illustre clinico. Egli aveva visitato in un albergo della città, in consulto con un egregio medico inglese, un Signore forestiere, che presentava i sintomi di una porpora emorragica, in condizioni gravissime. Poche ore dopo il consulto il Professore Osler partì per Firenze e, venuto a sapere che in quella città e altrove si erano verificati casi di vajuolo, mandò subito al medico inglese a Roma un telegramma, nel quale gli diceva di essere cauto e di pensare nel malato, veduto insieme, alla possibilità di una porpora vajuolosa. Ciò, che ha creduto di fare in questa congiuntura W. Osler, richiama alta mente il verso di Dante,

"O dignitosa coscienza e netta!"

Ricorderò un altro consulto che il Professore Osler ebbe con il

Raffaele Bastianelli and me in a case of tuberculosis of the right kidney in a young lady. Prof. Osler confirmed the diagnosis and the urgent indications for operation with favorable prognosis. The patient was operated upon by Prof. Raffaele Bastienelli and now she is married and a mother in the best of health.

After this consultation Prof. Osler took me by the arm and walked out of the house with me. It was a beautiful spring morning, with the purest Roman sky of intense blue, and in the gardens around the patient's house, the roses were in full bloom. I could see from his expression that he enjoyed this beautiful sight. After saying good-bye to me as to an old friend, he left me to go to the Roman Forum and to the Palatine, drawn thither by his classical knowledge, through which he was enabled to understand the glories of ancient Rome, beholding the ruins of the imperial palaces, the temples, the amphitheatres and the basilicas.

Of the classical knowledge of W. Osler I was given some comprehension by reading his powerful discourse "*The Old Humanities and the New Science*" delivered in the year of his death at the University of Oxford and published

Professore Raffaele Bastianelli e con me in un caso di tubercolosi del rene destro in una Signorina. Il Professore Osler confermò la diagnosi e la indicazione urgente della operazione con prognosi favorevole. La malata fu operata dal Professore Raffaele Bastianelli ed ora e sposa ge madre in oltima salute.

Dopo il consulto il Professore Osler mi prese a braccetto e usci con me. Era un bel mattino di primavera, con un cielo romano purissimo, di un turchino intenso e nel giardino, dattorno alta casa della inferme, le rose erano sbocciate. Compresi del suo aspetto ch'egli godeva di quella bellezza della natura. Dopo avermi salutato, come fossi stato un antico amico, mi lasciò per andare al Fore romano e al Palatino, ove lo chiamava la sua cultura classica, per la quale egli era in grado di comprendere tutta la grandezza di Roma antica nei ruderi, nelle rovine dei palazzi imperiali, dei tempi, degli anfiteatri, delle basiliche.

Della cultura classica di W. Osler io ebbi come la sintesi dalla lettura di quel suo forte discorso, "The old humanities and the new science" *fatto nell'anno della sua morte al l'università di Oxford e inserito nel*

in the British Medical Journal for July, 1919. This I called attention to in my inaugural address, "*Retrospect of Progress in Medicine*", delivered by me in November 1919, at the University of Rome. In that discourse, among so many important things, Prof. W. Osler with the perspicacity of a wise clinician considers that the spirit of the doctrine of Hippocrates is still alive and working, and is still, as he says "*a living force*". And he is perfectly right, because the medical principle of Hippocrates (of whom, as was written by Aulus Cornelius Celsus, "*primus, ex omnibus memoria dignis, disciplinam hanc* (medicine) *ab studio sapientiae* (philosophy) *separavit*", the principle, that is, of founding the study of medicine absolutely on the study of the diseases which are offered to actual observation without preconceived theories, has remained, like an immutable truth, unchanged throughout the centuries, among the discoveries, observations and experiences of innumerable new facts, and the succession of new systems and theories. This is a principle to which the great physicians of all ages up to the present time have remained faithful, wherefore that foremost physiologist Claude Bernard, said, "*on a raison de faire commencer la médecine à Hippocrate.*"

British Medical Journal nel Luglio, 1919, e che io ricordai nel discorso inaugurale "Intorno ai progressi della Medicina" da me fatto nel Novembre, 1919, alla università di Roma.

In quel discorso, fra tante cose importanti, il Professore W. Osler, nella sua perspicacia di clinico sapiente, considera che lo spirito della dottrina d'Ippocrate sia ancora vivo e operante, sia ancora, com'egli dice, "a living force." *Ed egli ha perfettamente ragione perchè il principio della medicina d'Ippocrate, il quale, come scrisse Aulo Cornelio Celso* "primus, ex omnibus memoria dignis, disciplinam hanc (la medicina) ab studio sapientiæ (la filosofia) separavit" *il principio, cioè, di fondare tutta intera la medicina sullo studio delle malattie quali si offrono alla sincera osservazione, senza preconcetti teorici, come una verità immutabile, e rimasta immutato, altravorso il corso di tanti secoli, fra le scoperte per la osservazione e la esperienza, d'innumerendi fatti nuovi, il succedersi dei sistemi e delle teorie, principie, cui furono fedeli tutti i grandi medici di tutte l'età fino all'epoca presente, onde quel sommo fifiologo, che fu Claude Bernard, diceva "on a raison de faire commencer la médecine à Hippocrate."*

It has been written in a biographical notice that William Osler, in his religious devotion to duty, and in his profound human sympathy to his fellow beings, conformed to the principles and sentiments of the ancient philosophers, among whom was the Emperor, Marcus Aurelius, whose statue reigns over the Campidoglio. To have a convincing proof of this, it is sufficient to read some of the thoughts of William Osler in that golden little book, "*A Way Of Life*", written by him for his students. He had three ideals: "*To do the day's work well and not bother about to-morrow; to act on the golden rule towards his professional brethren and patients; and to cultivate a measure of equanimity to enable him to bear success with humility, affection of friends without pride and to be ready when the day of sorrow and grief comes to meet it with courage befitting a man.*"* Now these noble ideals of W. Osler are in accord with many of the thoughts which we read in the writings of Marcus Aurelius, and the last ideal of *Æquanimitas* in good and ill fortune, is contained in the first strophe of the ode of Horace to his friend Dellio:

E scritto nella biografia ricordata che William Osler, nella sua religiosa devozione al dovere nella profonda umana simpatia verso i suoi simili, si conformasse ai principii, ai sentimenti dei filosofi antichi fra i quali di Epitteto e di Marco Aurelio imperatore, la cui statua trionfa sul Campidoglio. Per averne una prova convincente basta leggere alcuni dei pensieri di William Osler nell'aurelio libriccino da lui scritto per gli studenti "A Way of Life." *Egli aveva tre ideali* "To do the day's work well and not bother about to-morrow; to act on the golden rule towards his professional brethren and patients; and to cultivate a measure of equanimity to enable him to bear success with humility, affection of friends without pride and to be ready when the day of sorrow and grief comes to meet it with courage befitting a man."*

Ova questi nobili ideali di W. Osler concordano con molti dei pensieri che si leggono nei ricordi di Marco Aurelio e l'ultimo ideale sulla aequanimitas nella sventura e nella fortuna propizia è contenuto nella prima strofe dell'ode d'Orazio all' amico; Dellio,

*Æquanimitas

*Æquanimitas

"Aequam memento rebus in arduis
Servare mentem, non secus in bonis
Ab insolenti temperatam
Laetitia, moriture Delli."

Thus, also in Rome, among the physicians who had the good fortune of knowing him, there lives the memory of William Osler, who dedicated wholly his noble life to the pursuit of science, to the art of teaching, and to the good of humanity.

"Aequam memento rebus in arduis
Servare mentem, non secus in bonis
Ab insolenti temperatam
Laetitia, moriture Delli."

Cosi anche in Roma fra i medici che ebbero la fortuna della sua conoscenza è viva la memoria di William Osler, che tutta la sua nobile vita dedicò alla scienza, all'insegnamento, al benè della umanità.

ETTORE MARCHIAFAVA,
Professore emerito di Patologia,
Università di Roma, Italia

14 Febrajo, 1925

LITERARY INFLUENCES ON THE WRITINGS OF OSLER

"TO mind the inside of a book is to entertain oneself with the forced product of another man's brain. Now, I think a man of quality and breeding may be much amused with the natural sports of his own"—Lord Foppington in *The Relapse.*

Charles Lamb, beginning his essay "Detached thoughts on Books and Reading" with the above quotation, proceeds to acknowledge the force of Lord Foppington's remarks by admitting with his usual ultra self-depreciation that he could not sit and think: "Books think for me." We venture to state that in everything that Sir William Osler wrote that was not of a strictly scientific character there is evident the fruits of his wide reading and familiarity with the classic literature of all ages and races. But with what a different result from that to be anticipated in the case of a Lord Foppington, as jestingly foisted upon himself by Lamb. We are all familiar with Osler's list of bedside books, suggesting, long before the "daily dozen" or the "fifteen minutes a day" plans for

physical and mental improvement were promulgated, that keeping this little library at the bedside and dipping into it morning and evening would yield surprising results.

Although the writings of Osler abound with quotations from or references to all of those mentioned in his bedside list as well as many other of the classics of literature, yet his literary style is peculiarly his own and his thought untrammelled by bondage to any particular master. It has not the pompous solemnity of the Elizabethan prose with which he was so familiar, nor the involved and often obscure phraseology of his beloved Sir Thomas Browne, nor the splendid pomp of Milton's prose which he so often quotes, nor the antithetical accuracy of Addison's. Osler had absorbed all that was best in English literature, both old and new, and as his thoughts were peculiarly his own, the result of his keen observation and logical accuracy, so he expressed them in a clear, lucid and forceful manner, not borrowing his manner of expression from any of the great masters of that art who had preceded him.

His power of quotation was inimitable and unlimited. To instance a few references indicating his intimacy with the various books of the Bible, especially those of the Old Testament, let us mention the following in addition to his favorite "Sons of Belial;" "The Threshing Floor of Araunah, the Jebusite;" "The Spirit Abroad was that of Deborah not Rizpah, of Jael not Dorcas"; "Son of Sirach"; "Sons of Beor"; the special virtues of the trained nurse on a fever case could be depicted by King Lemuel alone; and who else could have so aptly used this as an illustration of his point: "Ephraim joined to his idols."

His Shakespearian references are likewise always good. On more than one occasion he uses the happy expression of "voluble Cassios" to symbolize those who talk too much. In many instances his references would serve as well as crossword puzzles to stimulate dictionary research. Thus he speaks of Atkinson, the medieval bibliographer as a Thelemite. How many readers of Osler realize that a Thelemite was a monk of the Abbey of Theleme, so eloquently described by Rabelais. Osler may be said to

have fulfilled, in his own person, Walter Savage Landor's wish, which he quotes, that he might walk with Epicurus on his right hand and Epictetus on his left, if we were to judge by the familiarity which he manifests with their sayings. From no writer of antiquity does he quote more frequently than from Plato. He had him at his fingertips.

It is needless to write of his constant references to his favourite, Sir Thomas Browne. Since Charles Lamb no one has done more to spread the fame of the author of the "Religio Medici."

Though Fields, the Boston publisher, brought out an edition of the *Religio Medici*, the works of Sir Thomas Browne were but little read in America outside of the more select intellectual circles until Osler, by his allusions to them in his addresses and articles, aroused the interest of the members of his profession in their ancient *confrère*. So that there are now but few cultivated physicians in this country who have not been led to at least read the *Religio Medici* and have thus had the door of pure literature opened to them. The indirect influence of Osler in promoting the spread of a just literary taste among the profession it is impossible to estimate. His contact with thousands of physicians through his teaching and writings was especially wide-spread, with correspondingly broad results. He was really the first great American medical teacher to exert an extra-professional cultural influence on his students and followers. The leaven of his spirit has already wrought a great benefit to the profession and it is safe to say will continue to do so for many years.

FRANCIS R. PACKARD,
Philadelphia

OSLER UND DIE GESCHICHTE DER MEDIZIN

*SIR WILLIAM OSLER kannte ich lange Zeit hindurch nur aus ein Paar kurzen Briefen, die er an mich gerichtet in Fachangelegenheiten und in Sachen meines Institutes, dem er wohl gesinnt war. Er betätigte sich als dessen Wohltäter, nicht nur indem er seine eigenen Arbeiten der Instituts-bibliothek schenkte, sondern auch als Vermittler und Donator kostbarer und seltener englisher Publicationen, so der "*Apostles of Physiology*" und der "Tabulae Anatomicae" des Vesalius, beide von William Sterling.*

Als ich das Glück hatte Sir William Osler endlich persönlich kennen zu lernen 1913 auf dem Internationalen Medical Kongress in London und einige Male kurz zu sehen und zu sprechen, machte er einen grossen Eindruck auf mich. Mich fesselte die grosszügige Freiheit seiner ausgeglichenen Persönlichkeit, die Ruhe und Treffsicherheit seines Urteils, seine hohe Erudition, sein weiter Blick und die Vornehmheit seiner Auffassung von Menschen und Dingen. Leider war es mir nicht beschieden, ihn im seinem Heim zu Oxford zu sehen, umgeben von seinen Bücherschätzen in deren Zusammenstellung sich die ganze Reife seines Wesens gleichsam leibhaftig manifestierte und nach Aussen projizierte. Dort muss er völlig unwiederstehlich gewesen sein.

KARL SUDHOFF,
Leipzig, Germany

GENERAL ARTICLES

OSLER'S PLACE IN THE HISTORY OF MEDICINE

FIELDING H. GARRISON, M.D.

Lt.-Col. Medical Corps, U. S. Army
Washington, D.C.

AT the Homewood meeting of the Johns Hopkins Medical Faculty in memory of Sir William Osler, Professor Welch developed a thought which will undoubtedly be the most viable line of approach for those who, in the future, may attempt to estimate the position of Osler in modern medicine. Dr. Welch said, in brief, that Osler was, beyond peradventure, the greatest physician of his time, but that his fame is not the effect of any isolated quality or achievement, but the resultant of a remarkable complex—eminence in bedside medicine, in original contributions to scientific medicine, in medical teaching, as a contributor to medical literature and medical history, as the originator of many pithy aphorisms and novel views of things, as a publicist, as a friend and mentor to patients, pupils and colleagues alike. Osler's was a many-sided personality, *totus, teres atque rotundus.* He was not a lop-sided man, of the kind now tolerably familiar, who have "the intellect and the information," but no corresponding degree of personal refinement, goodness of heart, liveliness of humour or soundness of sense. Carlyle said that fool and rogue are only opposite sides of the same medal. Emerson intimated that the felon and the intellectual coxcomb are really enharmonics, things differing by a small number of vibrations, but producing identical effects in practice. Osler was never carried away by the "mad pride of intellectuality." He was a shining exemplar of "the ancient and inbred piety, integrity, good sense and good humour of the English people." If I have grasped the meaning of his life at all, it would be that intellect, without honesty, decency, humour and humanity, is about as useless and dangerous as an East Indian cobra or a Bengal tiger in a dark room.

The Editors have asked me to say something of the effect of Osler's pathological training on medicine, but for this task I am

nowise competent. I can only repeat what I have learned and know. His McGill post mortems, which Dr. Abbott has kindly shown me in MS., were the basis of his wonderful grounding in pathology, and here he was the loyal follower of Morgagni, Baillie and Virchow, ever seeking the relation between the pathological specimen and the clinical history. As a youth, he was one of the first to investigate the trypanosomes and the blood platelets, he discovered *Filaria osleri* and described a species of verminous aneurism, a form of telangiectasis and one mode of the cyanotic polycythaemia which goes variously by the names of *maladie de Vaquez* and Osler's disease. He investigated the sliding-valve relation of ball thrombi to aneurism of the heart, did a vast amount of work on aneurism, endocarditis and other disorders of the circulatory system, of which "Osler's spots" (in endocarditis) is probably but one of the many clinical minutiæ noted by him in bedside practice. Dr. Welch has suggested the manifest need for a close analysis of this phase of Osler's work, such as Sir Dyce Duckworth made from the writings of Heberden, or what Sir Samuel Wilks did for Bright. Something of this kind has gone forward in the biography which Harvey Cushing has prepared, fostered by Lady Osler and based upon the collective letters and literary remains, as also in the Classified Bibliography published in this volume.

So much has been said and written of Osler as a teacher that one shuns repetition. His chosen epitaph was "He taught medicine in the wards." He tried to make his pupils reliable, characterful men as well as competent physicians, and, in the words of Dr. H. M. Thomas, he "not only took them into the wards but stayed with them there." He followed up his pupils in their professional lives and never forgot them. I know of only one case in which he lost interest and that was where a pupil neglected his clinical work through worry about family troubles. Absorption in hard work was, in Osler's view, the proper antidote. In teaching medical history, his methods were unique. He brought it directly into relation with ward work, devoted special evenings to the subject at his own home, and the device of the Medical History Club, introduced at the Johns Hopkins by Osler and Welch, has turned out to be the only method of instruction that is humanly interesting and productive of results. In the sick-room Osler was the ideal physician, his bedside manner compact of the Hippo-

cratic "respect for the patient" and the sympathetic method of eliciting information which characterized Trousseau and Dieulafoy. One of his patients, a relative of mine, asked, in convalescence, if he might smoke. "You may," said the friendly Chief, "and here" (suiting the action to the word), "is a good long cigar."

Of Osler's contributions to medical literature I have given some detailed survey in the "Annals of Medical History." Exhaustive bibliographies* have been prepared by Miss Blogg and for the Canadian period by Dr. Abbott, and the writings have been analyzed *in extenso* in Cushing's biography. Of Osler's literary style, Dr. Streeter has given an effective impression: it has "the pleasant movement of a gondola over a Venetian lagoon." Everything is simple, unaffected, lucid, limpid, forward, with occasional passages of prophetic fervour, of vigorous denunciation or of twinkling humour. In the opening of the "Servetus" the style is grave, sombre, poignant, mournful. None, save perhaps Lecky, have realized with such dramatic intensity the awful tragedy of martyrdom by fire. No other great physician, not even Claude Bernard, or at most Huxley, has evolved so many wise and witty aphorisms, not perpetrated at the expense of truth, but informed with valid "criticism of life," professional knowledge and sympathy with human nature. The collection which Dr. Camac has made should be known and prized, not only by the intelligent laity, but by every physician who loves his profession. You will find much of the real Osler in the Silliman Lectures on the History of Medicine, recently published. He himself described it as "an aeroplane flight," and it is, in effect, an unique example of his capacity for the bird's eye view and the soaring quality implied. We are taken up to the altitude of Whitman's Man of War Bird, above the dead rattle of existence, and see everything, "from China to Peru," in a space-and-time perspective.

If the expression "publicist" can be applied to Osler, it is only in the sense that his reputation and abilities constantly brought him into public relations. He was no platform orator, "making a noise like a reformer," but a kind of Prospero, who saw fit on occasion to rebuke evil and folly, and to incite people or groups of people, to do good work, by the stimulus of his enthusiasm and the magic wand of his encouragement. Whether it

*Revised and extended in the Classified Annotated Bibliography in this volume, pp. 473–605.

were campaigning against malarial fever and tuberculosis, zeal for the better education of medical students and nurses, keeping his students and friends busy with suggested lines of research or the mere casual human touch with some isolated physician or patient in a distant city, there was always this abiding note of contagious enthusiasm and generous encouragement. Naturally fond of his fellow creatures, he became so popular unawares that he had to devise ways and means for the lithe, perpetual escape. Dr. Thayer has described, with telling humour, how far this talent for evasion came latterly to be developed. Toward the end of Osler's life it was a common experience to encounter people who affected to know him more intimately than his intimates, as if they had a sort of proprietary interest in him; but as Thayer has said, no one could talk consecutively to Osler against his will. In ignorance of the constant button-holing, I once asked him for a reprint of his "Æquanimitas." Carefully noting the item in his memorandum book, he made some mournful ironic reference to Themistocles' prayer for "forgetfulness," and was out of the room and on his way in an instant. That reprint I never received, but shortly after, when he came to say good-bye to us at the Surgeon-General's Library, before assuming his post at Oxford, he told Dr. Fletcher that the inroads upon his private leisure from practice alone, were pestering him to death; and I understood. During the war period, the constant run of guests at Oxford, where his hospitality was boundless, may have helped him to forget for a while at least, the tragedy of his life, the loss of his son; but the number of self-invited visitors who "had to see Osler," must have been considerable. Although my direct personal relation with him was but brief and casual, I retain several vivid impressions, but none more distinct than the first, of the dark, handsome, distingué figure, the voice of pleasant tones, and the warm glance that brightened up any interior he came into. Almost none of the earlier portraits of Osler are satisfactory, until we come to the two Toronto photographs, with the gestures of cupping the chin and shading the brow. Best of all are the two Baltimore pictures of the fine old gentleman seated, three-quarters length, with his back to an ivied wall, the "imperial Osler" of Professor Gildersleeve's sonnet. When Osler died, there were laurel wreaths even from Germany. The memorial tributes of Friedrich Müller in Munich, Wenckebach in Vienna and Sudhoff in Leipzig are

sincere and came straight from the heart. Any other feeling would have been as unthinkable as hostility to the warm sunlight or the blue sky. No other Canadian of his time did so much for the good name and fame of his country in all lands as this kindly, benignant and most unrivalled physician.

WILLIAM OSLER

Sir German Sims Woodhead, F.R.C.P., (Edin.), F.R.S.

Cambridge, England

[This article, which is published posthumously, was the first received in response to the request sent out to our members for contributions to this Memorial Volume. We deeply regret the passing of its revered author, whose genial nature, and warm-hearted friendship for the subject of his article, are reflected in every line.—Editors.] *

IN whatever sphere of work Osler had engaged he would have made his mark. However he had approached the study and practice of Medicine, his could but have been a successful career. He seems to have had a genius for approaching whatever he undertook by the best path and of doing it in the right fashion. This comes out at every turn in his plan of training himself for his career as a great physician. Should he acquire skill in anatomy? Yes! Should he devote himself to Physiology? Certainly! These subjects must be made the basis of his knowledge of Medicine. Without a knowledge of the normal processes of life, to a study of which he devoted himself even as a boy, the abnormal could not be recognized. Having acquired the "elements," however, he could give himself to the study of the gradual modification or alteration of function if so he might determine how these were related to, and succeeded by, modification of structure. His Professorship of Physiology came to be an avenue of approach to Pathology. Though he was no mere morbid anatomist, collector of specimens, or examiner and student of dead material, he early recognized that morbid anatomy must form the basis on which Pathology and Medicine could be built up, and to him the Museum came to be regarded as the repository, not of rare specimens only,

* For obituary of Sir German Sims Woodhead see Bulletin VIII of the International Association of Medical Museums, Part I of this Memorial.

but of organs and tissues in various stages of deviation from the normal, some in which marked, though perhaps transient functional changes had been noted, might show departures from the normal which only the expert with his accurate and extensive knowledge of normal structure could detect; others might be the seat of extensive changes, acute or chronic, associated with profound toxic conditions, with rapid degeneration of the more highly developed cells, or chronic atrophic and fibroid changes associated with long-standing disease; in these latter the functions of the organ accommodating themselves to the altered condition for a period at any rate, though in the long run heading to a stage in which the whole functional economy is shattered.

I remember as a young student and teacher of pathology being deeply impressed by an analysis published by Osler of some work on dysentery and dysenteric abscesses of the liver. All was characterized by an accuracy of observation, a precision of definition, and a clarity of reasoning that appealed very forcibly to one just entering on a teaching career, and whenever afterwards I read anything that Osler had written, or heard him discuss his clinical experiences, my mind invariably reverted to the period during which he was preparing to take up his own life work. To Osler the Museum, like the post-mortem room, provided but the final chapter in the story, the first consisting of physiological experiments; for, whilst looking forward, he always appeared to work back, viewing each case of disease that he was called upon to diagnose and treat as an experiment or rather series of experiments (not always easy to control), from which he aimed at gaining and seemed to gain fresh light on problems that to others gave little promise of solution.

The Museum was, to Osler, an additional side-room to the clinical ward. The methods there adopted were to him just as essential to the study of clinical cases as were the adaptations of physiological methods and those of bio-chemical research; and the more intimately he could combine these methods and utilize them, the more satisfied was he with his results. Pedantic he never was, accurate always. He was not of those who say "such and such shall be your plan of investigation and treatment." He realized that a problem might be attacked from many sides, and the young men who came in contact with him and under his influence will be everlastingly grateful to him that they were not ex-

pected to fit their knowledge and confine their methods within the limits of a cramped and rigid carapace. As a histologist he never contended that morbid histology could yield all essential knowledge of disease; on the other hand he did not disdain the information that could be garnered by recourse to histological methods. Morbid anatomy, for him, dealt not merely with those organs and tissues in which advanced changes were manifest. It included a careful examination of all the organs and tissues of the body, those in which slight, as well as marked, consequential or associated, changes could be found, and even those in which there were no obvious alterations, all his observations being co-related with observed symptoms during the life of the patient. As a physiologist he did not insist that to approach disease from the physiological standpoint was the only proper method of gaining clinical information. He welcomed whatever of value was to be derived from his studies of the normal, but he appreciated the limitations of the method as well as its advantages; recognizing, for example, that the reactions of tissues slightly damaged may differ greatly according as the other tissues of the body are healthy or are the seat of disease; that the circulation through a damaged or obstructed vessel or organ might vary according as the blood or its constituents are normal or abnormal and according as the heart might be healthy or damaged by constriction of the orifices, by incompetence of the valves, or by hypertrophy, atrophy, or degeneration of the cardiac muscle. Again, whilst welcoming the aid of the bio-chemist and the vast possibilities opened up by the delicate and accurate methods of bio-chemistry, he never claimed that every problem in medicine may be cleared up by bio-chemical methods. He recognized how valuable these are and how great their importance may ultimately become in relation to bacterial and protozooal infections, and how the alteration in functions of the several organs of the body may be detected, traced and determined; but his mind was so well balanced and his reasoning so just that the lack of sense of proportion so characteristic of many specialists found no resting place with Osler.

It may be asked why, in describing Osler's relation to the Museum special stress should be laid on the above points. It is because most of us believe that he appreciated, as few are capable of appreciating, the importance of the Museum, as a gathering ground for "texts" and information,—one of many such, but of

prime importance. I well remember, during examination at Oxford, placing before a medical student a fibrinous cast of a small bronchus and some of its ramifications, coughed up by the patient suffering from "fibrinous inflammation" of the bronchus. Osler, who was standing by, noting a certain nervousness in the student, remarked, "Well, I am glad nobody examined me on that, but I suppose it is a fibrinous cast. Assuming that it is, I wonder what the conditions are in which it was formed and where it would come from!" (In 1875 he published a paper "On the minute structure of bronchial casts from a case of acute fibrinous bronchitis with expectoration of tubercular casts." See *Can. Med. and Surg. Jour.*, 1876, p. 539). Engaging in what the student took to be an informal conversation, the latter was led to suggest where and how it might be formed, what might be its composition and structure, what effect its presence would have on patient? Was it part of a general process? Was its effect merely local and were the symptoms directly associated with the presence of this cast or with the accompanying condition? and so on, until the student had shown that he knew something of what he was being examined on. I then and there put Osler down as an examiner as good as was Sir William Turner at his best; and I can think of no higher praise. His examinations followed his line and method of teaching; moreover it gave expression to his attitude to museum specimens, as nothing else could have done. With the final product of disease before him, he looked upon it as his business to trace the whole history of the pathological processes involved; from the smallest functional alteration, and the most rudimentary departure from the normal structure of the protoplasm or of the nucleus of the cell, up to the most marked changes leading to atrophy and fibrous tissue formation or to degeneration and death of an organ taken from the body at the autopsy. He believed that only those who have studied symptoms and diseased organs in every phase, associating the symptoms with the various changes found in the degenerating organs, become really successful physicians or surgeons. Even this, however, did not suffice to make him the perfect practitioner he became; but to this experience he added his knowledge of, and sympathy with, men.

Osler was a great teacher and we have no more direct evidence of his greatness and thoroughness than that afforded by his dependence on the museum as a storehouse into which might be

garnered interesting specimens to be studied, singly or in groups, not by the junior student only, but by those of more mature experience, who may wish to study disease from a new point of view and who desire to recast their ideas and to regroup the results of their observations and experiments. Osler was in these matters a wise adviser and loyal friend alike to pupils and patients.

THE INFLUENCE OF PATHOLOGY ON THE CLINICAL MEDICINE OF WILLIAM OSLER

Thomas McCrae, M.D.

Philadelphia

OF the various ways of approach to clinical medicine there is no doubt as to the one by which William Osler travelled. It is very evident to anyone who knows the history of his medical development, but it would have been apparent to any close observer, even if he knew nothing of the man's history, who listened to his clinical teaching. It was by the way of pathology that he arrived and one has only to study his Textbook of Medicine to see this abundantly illustrated. As he taught physiology for some years it might have seemed more natural for him to have come by it, but that this was not the case seems to have been due largely to his type of mind. He was essentially the naturalist, for whom the study of structure and type has always a fascination. The variations due to disease afforded an interesting subject of study both when they were of the common form and when they were unusual. This does not mean that he was not interested in the disturbance of function, but the changes responsible for this apparently interested him more. The experimental method of research did not appeal as much as that which was based on observation.

He stored mentally the many examples of this and that peculiarity which came under his observation, so that when subsequent similar examples were seen he was able to bring both the clinical features and the pathological findings to aid in the solution of the case in hand. An example may illustrate this characteristic, although it applies to a clinical and not to a pathological problem. Some years ago a patient was seen in consulta-

tion who had a very remarkable list of opinions from eminent physicians and neurologists, American, British, French and German. The number of them was remarkable but the diversity of opinion was even more so. The case was an unusual one of paralysis agitans of very slow development, and when I saw the patient, after many years of illness, by no means typical even then. His physician told me that the only man who had even suggested the proper diagnosis in the early stages was Sir William Osler, who had seen him some years before and whose remark was, "I am not sure what disease your patient has, but the only other patient I have seen like him proved later to have Parkinson's disease."

William Osler was a great morbid anatomist and his "clinics" in the autopsy room were if anything more interesting than those by the bedside. He reconstructed the history of events from the specimens and correlated it with the clinical history. There was often a reference to other cases seen in Montreal or Philadelphia and sometimes the advice to go and see a particular museum specimen if one visited those cities. The remarkable Philadelphia specimen of dilatation of the colon is a case in point. Many of us had a mental picture of the patient and of the specimen from his description. He showed in this regard a characteristic common in British and rare in American clinicians, namely, the knowledge of specimens which illustrate a clinical problem. It is not uncommon to hear a British clinician at the bedside clinic refer to a particular specimen in the museum as if he were speaking of the patient in the next bed. That the students know the reference is evident by their reaction. This is unusual in American clinics. It represents a close association between morbid anatomy and clinical medicine, and is of great value in visualizing the morbid processes present in a patient. On certain subjects he was particularly illuminating. Among these, tuberculosis perhaps took first place. Who that has heard one of those talks can forget how he traced and discussed the whole subject of tuberculous infection as illustrated by the specimen under observation? It was not the pathology alone which he made clear, but the history of our knowledge of the process under discussion was often used to illustrate the points. The history of the development of our knowledge of tuberculosis as shown from the pathological side gave one a broader conception of the subject.

During the Baltimore period he did not give the impression

of being interested in pathology for its own sake, whatever may have been the case in earlier years, but rather as its findings had a bearing on clinical medicine. The correlation of facts both clinical and pathological was always in evidence. The lessons to be learned from pathology by the clinician, and the need of using them was a frequent topic in his talks. He often referred to the salutary lessons of the dead-house, and the benefit that might be gained from them. He was never one who hedged when an error had been made. On one occasion when the autopsy showed a very different condition from that stated in the clinical diagnosis, his parting remark to the students was "Gentlemen, if you want a profession in which everything is certain you had better give up medicine." His honesty in acknowledging mistakes was part of his whole attitude towards life, but his long training in pathology no doubt strengthened it. The importance of the use of the facts of pathology to prevent and correct the fancies of the theorist was a favorite lesson.

There was never any difficulty in having him present at an autopsy and almost any other engagement would have to wait. He may have come as an onlooker but very often he was taking part before he knew it. It was always amusing to watch him when the pathologist was perhaps rather slow in getting on with the examination. He usually took hold of the work himself. His assistants were always watching to turn up his sleeves and cuffs as he rarely thought of them and it was difficult to persuade him to put on rubber gloves. Nearly always he handled the specimens himself and was not content with merely looking at them. Dr. Barker has told the story of a physician in a Maryland town who commented on the fact that often he was unable to get Dr. Osler to come for a consultation with a large fee, but that he would always come to attend an autopsy in which he was interested.

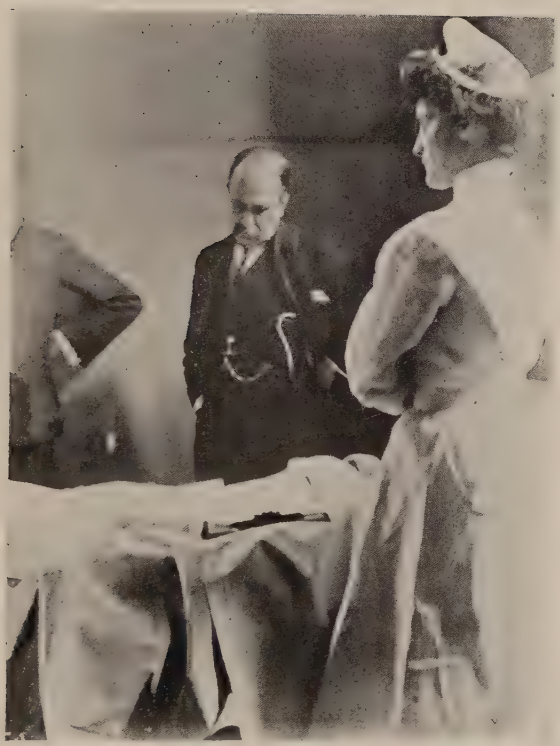
In his bed-side teaching there were many references to pathological changes. One can see him taking out his handkerchief to illustrate by the hem the thickening of the aortic valves in a sclerotic process. He described the progress of events so that one could almost see it going on. He was particularly happy in describing the changes in the mitral valve in stenosis so that one could almost visualize the appearance of the valve in the patient under observation. The same applied to his descriptions of the vegetations in endocarditis.

He was always keenly interested in the securing of post mortem examinations and it was always safe to promise some assistance with the funeral expenses if that argument seemed likely to succeed. He would always go to much personal trouble if his influence and words seemed necessary to secure permission for an examination.

He had a considerable number of specimens in Baltimore, some of which came from Montreal and Philadelphia. There were 250 or 300 of them. He rarely used them in teaching but on some occasions he went over them and even if there were not many details on the label he remembered the particulars. Some of these were from his animal work in Montreal and these seemed to be particularly treasured.

He always insisted on the importance of a knowledge of morbid anatomy for the understanding of clinical problems. The importance of this in regard to therapy was emphasized in two ways. One was to show the absurdity of many claims made for the action of certain remedies by studying the pathological changes which they are supposed to cure. The other was to lay stress on the amount of damage which was often compatible with years of life and usefulness. The possibility of sufficient function to maintain life with extreme anatomical damage was often dwelt on and was a favorite subject. In his work in Baltimore he tended to dwell more on the gross morbid than on the histological anatomy. Yet when occasion demanded he could express a valuable opinion on this as well. The studies on the histological picture of the tissues in Hodgkin's disease interested him greatly. At a meeting when a rather radical opinion was brought forward which depended entirely for its support on the interpretation of histological details he said to the pathologist, after studying the specimens, "I know that my histological eye is a fossil one, but I cannot see the things you say are there." Time has shown that Sir William was right, and that the inferences made were based on incorrect interpretation of histological details.

Anything that had to do with the study of the blood always interested him, partly due no doubt to his early work in haematology. He was always enquiring about the blood plates. The morbid anatomy of the circulatory system was a favorite subject on which he often dwelt. Aneurism was an especially suitable topic for description and its effects were pictured so that one could almost see the changes which had been produced.



Osler and the Patient, Johns Hopkins Hospital.

OSLER AT THE BEDSIDE

From photographs in the possession of Dr. G. Lane Taneyhill, Baltimore, Md.

We shall not see his like again as a man nor shall we see the combination of one who took first rank as a morbid anatomist and at the same time was a great clinician. The qualities which are necessary for the combination are rare in the first place, the opportunities for the orderly development of both are not likely to occur again as they did for him, and the process of development and evolution of medicine has altered the whole relationship of chemistry, physiology and pathology to clinical medicine. Times change, but the time and the man brought about an unique result in William Osler's development both in pathology and medicine.

OSLER AS CLINICIAN AND TEACHER

C. F. Martin, B.A., M.D.

Montreal

WHATEVER rank the 20th Century may assign to Sir William Osler in the medical roll call of the 19th, certain it is that he was the outstanding figure in the profession both in America and in Britain; nor is it any exaggeration to say he was universally regarded on both hemispheres as one of the greatest exponents of modern clinical medicine.

Such was the distinctive characteristic of his work as to make him one of the most important links in the evolution of clinical knowledge. He represented not only the older type of clinicians who were, above all else, great *observers*, but also the newer generation whose advances, were, in the main, noteworthy because of laboratory *research*.

The prominent physicians of the past centuries were masters of observation, disciples of the best kind of empiricism, and gave to the world of their best through personal experience at the bedside, and through their marvellous lucidity in recording the results of their observations. Such, at all events, were striking features of the work of Bright, of Addison, of Sydenham and Fagge, while Osler, who was a master of descriptive medical narrative, allied himself with their generations.

But Sir William stood at the gate-way of the newer world of medicine, and added to his wide clinical knowledge a familiarity with the preliminary and biological sciences. While still a medical

student he became conspicuous at the Montreal Medical Society through his histological demonstrations of pathology, at a time, too, when the microscope was a rare instrument among the profession. Ever since his graduation, moreover, he was a keen student of comparative medicine, and some of his most important contributions in earlier years emanated from the pathological laboratory of the veterinary school. This broad interest it was that kept alive for so many years the scientific interest in all these subjects, and which encouraged among physicians and students an ever-increasing appreciation of the importance of pathology, physiology and higher chemistry.

But what, it may be asked, were the special qualities and characteristics that placed Sir William in so exalted a position among the greatest clinicians and teachers of his time?

Poll his students, his colleagues, his patients, and you will not find the answer far to seek.

Chief among Osler's professional attainments was an intimate *knowledge* of his subject—not a mere superficial acquaintance with its scientific side, but a penetrating understanding of it and of each and every collateral branch. With this masterful grasp of his subject he combined a *thoroughness* in the investigation and consideration of cases, reminding one of the great preceptors of the formative period in his development—Murchison, Burdon-Saunderson, Traube, and Laennec, (whose works, written more than a century ago, he commended to his students). With this thoroughness went a marvellous capacity for exact observations and a *memory power* unusual to a degree, capable of reclaiming alike from experience and from literature material that would throw new light on the subject in hand.

Thoroughness he regarded as the "sole preventive of the malady of charlatanism," a disease not altogether unknown within the confines of the profession.

An observer first and always, he laid insistence on the importance of inspection as an aid to diagnosis. Ten consecutive cases in his "Lectures on Abdominal Tumours" were diagnosed *de visu*. "Do not forget," he would say, "that the abdomen extends from the chin to the pubis," emphasizing at the same time the importance of a proper light, a proper angle of view, and the necessity of observing the phenomena with inspiration and expiration. How often would the revelation of a small mass, descend-

ing beneath the ribs on inspiration, show the presence of a neoplasm,—or again the minute subcutaneous nodules reveal to him the diagnosis of a gastric cancer. Recall, too, his insistence on the importance of the inspection of the back in the diagnosis of cardiac and aortic disease, and again the rapid diagnosis of Hughlings-Jackson's paralysis through the early hemiatrophy of the tongue, which had not escaped his all-seeing eye. These and similar instances were the chief characteristics of his daily rounds with students and colleagues.

Knowing full well the prime importance of patience and caution, he deplored the characteristic liking of our age for "short cuts" in diagnosis, and for "quick" results, and against both he warned by precept and example. "Go slow around the curves" was a maxim which he scrupulously obeyed and thus averted that precipitance which is the chief danger on the track of medical progress.

Nor, indeed, has the whole truth been told in this recounting. We must add the power of his well *ordered mind* to formulate authoritative opinion based upon carefully considered premises, his skill in embellishing those views with *historical allusion* and literary grace, master that he was of an *inimitable style;* and crowning all a wonderful *personality* that bound him to student and patient alike, compelling earnest interest in his word and spontaneous affection for the man himself.

As a clinical teacher he developed with his friend and colleague, George Ross, a new type of instruction, emphasizing as few had done in America the importance of bedside training in hospital wards. The influence of Ross upon Osler's development at this period is not sufficiently recognized. Few clinical teachers were then living in Great Britain who could so set the impress of their learning upon medical students as did he. It was a familiar subject of conversation in the medical clinics at Edinburgh,—this influence of Ross as a teacher,—his ability to give to candidates for the Scotch degrees the training that seemed to mark the McGill graduate of the day as a student of unusual ability. And so to Sir William Osler the stimulus of Dr. Ross' presence was a very special delight, his acumen in diagnosis, his thorough-going investigation of a case, beginning with the careful and complete history, and only ending when every organ in the body had been carefully explored by the clinical methods then in vogue. Woe

to the Resident whose records were incomplete or slovenly in the daily round. Little wonder, that with such a training in store for them, a hospital position in Ross' service was one of the prizes of the Medical School.

Like all great teachers Osler possessed the ability to make his students independent in their thought and action, seeking not to make them mere imitators of himself, patterned according to his own mould; rather did he aim to have them develop that which was distinctive in themselves, inspiring them through his own aspiration and strivings to attain new heights of knowledge and power. Not his, forsooth, was the talent that can merely copy, imitate, reproduce the work of predecessors, however illustrious,—rather was his the genius that penetrates, interprets, and reveals. To the students his reciprocal attitude was an added inspiration, and never did he lower himself to gain cheap popularity, nor did they feel themselves entitled to a familiarity that lacked respect.

Not the least important of his personal characteristics was an appreciation of the student and practitioner that was always something more than mere tolerance. To him it was a privilege in his hospital rounds to co-operate with them, to interest them, and, in gathering them about him, to raise their ideals and their standard of education, to give them a new zest and a new inspiration.

Among the many remarkable qualities possessed by this great physician was an inimitable faculty for clear *forceful expression* whether in the spoken or the written word. Not one of all the thousands who came under his influence but can recall some epigrammatic utterance—some suggestive saying, never to be forgotten but treasured among the priceless memories of cherished associations. In this category belongs his comment on "the advantages of a small amount of albumin in the urine," and his appropriate resurrection of the aphorism for all mouth-breathers, "Shut your mouth and save your life."

Who among us does not delight in remembering his terse reference to the arterio-sclerotic, of whom he succinctly remarks, "longevity is a vascular question," or again his simple candour in disposing of the question of water-cures and spâs, and the alleged specificity of their treatment—"the efficacy in reality is in the water,—in the way it is taken, on an empty stomach and in large quantities." Discussing the analytical method of Freud

he likened it to the old method of the confessional in which the sinner poured out his soul in the sympathetic ear of the priest. "It is a difficult procedure," he continues, "not for all to attempt, exhausting alike to the patient and doctor, and when thoroughly carried out, time consuming." And again, he disposes of a chapter on the treatment of erysipelas in the following characteristic manner: "Perhaps as good an application as any is cold water, which was highly recommended by Hippocrates."

In his *magnum opus*, "The Principles and Practice of Medicine," he has revealed with translucent clearness his exceptional attainments as a teacher. "The printed page," he says, "has brought me mind to mind with men in all parts of the world, and to feel that I have been helpful in promoting sound knowledge is my greatest satisfaction."

This great work, the best text-book ever written, a veritable store-house of information, enriched with redundant reference from his own clinical experience and with a mass of historical data most marvellously condensed,—these afford ample evidence of his greatness as a teacher, as a clinician, and as a source of inspiration to all privileged to come under the spell of his versatile and matured genius.

But above all else, it was as a man, as a personal inspirer, that his power as a teacher was most conspicuously manifest. For above all the forces that made for progress in British and American medicine was this personal factor, the indefinable power of a genial, rounded and masterful personality. Thus it was that by "adding probity to learning, sagacity and humanity, he reached the full stature of the Hippocratean physician." His exceptional ability as a clinician and teacher were singularly enhanced and perfected by the breadth of his sympathies, as cosmopolitan as they were genuine, and certain to preserve him in the affection of all who experienced his solicitous concern for their good.

His was a personality robust, strong, and tender, the tenderness gaining added beauty from the strength. Moreover, his intellectual power was matched by unusual moral force,—the whole crowned with that grace of humility which is ever the supreme mark of a great character. And thus it is true that we can understand how he was enabled to maintain, despite all the experience in his professional career that tempted to cynicism and pessimism, a robust and rational optimism which, while frankly

recognizing existing evils, enabled him to see beyond them to the forces that make for truth and goodness in the world.

His was a life lived truly, fully, progressively, lovingly, with no anger at criticism, no catering to popular standards, no desire for mammon, no falseness to his ideals, and no surrender to a life of indolence,—a life steeped in tireless, unselfish service and in radiant hope.

To him we may fittingly apply the words recorded by our most distinguished modern poet in the last verse of the last poem from his pen,—

> "One who never turned his back but marched breast forward,
> Never doubted clouds would break,
> Never dreamed, though right were worsted, wrong would triumph,
> Held we fall to rise, are baffled to fight better,
> Sleep to wake."

SIR WILLIAM OSLER

TEACHER AND STUDENT

"It would seem, Adeimantus, that the direction in which education starts a man will determine his future life."

*—Plato, Republic IV.**

RUFUS COLE, M.D.

New York

ONE sometimes fears that the student of the history of medicine in the years to come may have some difficulty in judging the character and value of Sir William Osler's contribution to this branch of learning. He was a man of such wide and varied interests and his avocations were so numerous that there is danger that his contemporaries who were not intimately associated with him during his years of greatest medical activity may fail to give proper consideration to his activities in his real vocation, that of a teacher of students of medicine.

He had a great capacity for impressing all those with whom he came in contact, he had great literary skill and, consequently, reached many who had no direct contact with or interest in

*Motto quoted by Osler for his address with the above title.

medicine. As a result, in his later years his circle of admirers and friends reached far outside the bounds of the medical profession. To many of these his work as a teacher of medicine represents only a subordinate aspect of a many sided life. In the minds of many he undoubtedly appears as a learned historian, as a classicist, as a bibliophile, as a unique and striking personality, as a wise counselor in worldly affairs, as a sympathetic and lovable friend, or as an able physician. Truly he was all of these things but, in addition, he was a great teacher of medicine, and as a teacher he made an extraordinary impression on the character of the medical profession of his time. During his lifetime a great change occurred in the medical profession in the United States, the methods of teaching medicine were revolutionized, and while other factors played a part in the transformation, certainly much can be directly traced to his influence. Is it not possible that those who look upon the great honours which fell to him during his Oxford years as the crowning glory of his career may not fail as grievously in appraising his life as have the Philistines who know of him chiefly as the author of a theory regarding old age?

Time can only reveal which of the various channels through which flowed his great personality were cut most deeply and permanently, but it seems most likely that it was as a student and teacher of medicine that he made the greatest impression on his time and that it is through the results of his teaching, transmitted through the medium of his students, that his effect upon posterity will be most significant.

He himself would have been the last to analyze his methods or to discuss their wider significance. He preferred to act and allow others to draw conclusions and inferences. It is possibly, therefore, not an entirely gracious task to dissect the methods he employed in teaching, and to discuss the character of the influence which he exerted upon medical progress. Nor do I feel competent to do this. Nevertheless, in these few inadequate lines I should like to recall his contribution to medical education, to medical progress, and to the science of medicine, rather than to dwell upon his great personality, or on his ability to inspire admiration and love, even that akin to worship. These qualities, of such paramount importance in a teacher, he possessed in an extraordinary degree, but the world has seen many

other teachers of medicine possessed of these magnetic qualities, who nevertheless exerted very little influence in the direction of progress or true enlightenment. He, however, was not only able to attract and entertain but he was able in addition to stimulate that interest which impels men to study and think independently and, above all, he was able to demonstrate an effective method of study to be employed. That he could successfully do this is shown by the large number of the leading students of medicine of the present generation who were his pupils and who received from him their chief inspiration.

This ability to transform crude unthinking youths into serious students was not the result of mere chance or the manifestation of a kind gift from the gods. He created students because he himself was a student. The laws of conservation apply in intellectual and spiritual realms as surely as they do in the physical world. No one gives out more than he receives. The most effective teaching is through example. To write in a delightful and entertaining way of the "Master Word" is splendid, but what really stimulated his students was the knowledge that he had gained his own power through travail and effort. The daily observation of his unremitting effort to gain more knowledge concerning disease stimulated imitation. Those who knew him in his youth and during his Montreal days when he was studying pathology have told us of his great industry. We who as pupils and assistants attempted to follow him day by day realized only too well the enormous intensity with which he entered into every task.

But he did not expend energy undirected. He had the true spirit of the student, of the investigator, and his activities conformed to one of the methods of scientific investigation. Lord Kelvin has distinguished between two stages in the progress of science, the "Natural History" stage and the "Natural Philosophy" stage, the stage of observation and description, and the stage of generalization and formulation.

During the nineteenth century most of the biological sciences, certainly medicine, was in the "Natural History" stage. Dr Gwyn has told in a splendid way of the early influences which directed Dr. Osler as a youth to the study of natural history. He early learned how to observe and to classify and he employed this scientific method in all his later investigations. For

Dr. Osler medicine was a descriptive science and the nosographic method was of prime importance in the study of disease. He recognized, as Faber has stated, that "to the clinician it is essential; he cannot live, speak or act without the concept of morbid categories." But although Dr. Osler made important contributions to nosography, as witness his study and analysis of the erythema-purpura group of diseases, yet it was in accurate observation and description that he was most interested, leaving to others discussion regarding the establishment of new classifications. Only those who were in intimate contact with him during his working hours in the wards can realize the remarkable power of observation and the skill in discriminating between the important and the unimportant which he developed. Added to this was a very remarkable facility in description, extremely accurate yet highly picturesque and interesting. These are the qualities which it seems to me are outstanding (rarely combined in such a happy manner in one individual) and these are the qualities which stamp him as a great scientist. Moreover, it was through these qualities—the love of work, the ability to observe accurately and describe clearly—that he made his greatest impression upon his students and upon the medicine of his day.

I have always felt that in his third year clinic Dr. Osler reached the high water-mark of clinical teaching—that indeed he here spoke the last word in the teaching art. This was not the conventional clinic—a lecture or demonstration. Instead he became one of a group of students, none of whom except himself had any knowledge of disease except that acquired from the study of dead tissues. Together they observed and described sick human beings. The special examples studied he himself had not previously seen, but they were chosen at random by his assistants from among those applying for treatment. One student was chosen to conduct the examination under Dr. Osler's direction, though each of the members of the class quickly became as interested and keen as though he were personally making the examination. By skilful direction the students were guided in detecting the particular features in which the patient differed from the normal. Dr. Osler looked and the students looked with him. Then they were guided in reasoning from effect to cause and cause to effect. They were initiated into the method of

Zadig. It was all like taking part in the most fascinating game, and it was all conducted as informally as a game. But it was the ideal application of a fundamental method of scientific investigation. The game did not end with observation. The students were directed to keep accurate notes, not from dictation, but to keep their independent records of their own observations. I have no doubt that many of the students wrote better descriptions during those third year clinics than they have ever composed since. Some of them in after life again became careless—some probably now keep no notes at all—but on many or most of these men there was indelibly impressed the importance of careful observation and accurate description.

The students were also skilfully directed towards methods to be employed in obtaining first-hand information from the literature—even the ancient literature—regarding the observations of others on identical or analogous phenomena. They were called upon to follow the patients to their homes and observe the progress of the abnormalities they had observed, and these observations had to be reported to the class. By the end of the course a student had not only learned the methods of clinical study but, because each patient had been stamped on his memory as well as recorded in his notes, he had acquired an experience such as many physicians do not obtain after years of practice. This method has since been imitated by many other teachers. But Dr. Osler's third year clinic marked a distinct advance in clinical teaching in this country. Students were taught to observe, record, and think. It brought into the teaching of clinical medicine the scientific method.

The ward rounds and fourth year clinic never seemed to me quite so successful or original, though they were models of their kind. It is true that the ward rounds partook much of the character of the third year clinic but much more stress was laid on memory tests, upon the classification and grouping of symptoms and signs, largely for mnemonic purposes. While such expedients are undoubtedly of great value to the student, yet they are probably not of great importance in arousing interest or developing scientific methods.

I have only had the opportunity to hint at certain of the methods employed by Dr. Osler. What I have tried to emphasize is that he was a great student of clinical medicine, one of

the greatest since Sydenham, and a very great teacher of medicine, possibly the greatest since Boerhaave. He wrote a treatise on clinical medicine that will long remain a model. In his study of disease he employed the "Natural History" method, the method of systematic botany and zoology, the method of Linnaeus and of Agassiz. At the present time there is a tendency to treat this method in a step-sisterly fashion. It must be borne in mind, however, that in the development of all the sciences data must first be collected. Generalizations then follow. In the study of medicine in its broader aspects, or of pathology, accurate knowledge of clinical phenomena is of the greatest value. To study the more superficial features of disease accurately and in the scientific spirit is a task worthy of the greatest minds.

Dr. Osler was not a student of the fundamental processes underlying clinical phenomena. There were few clinicians in the world who were engaged in these problems in his day. The water has flowed swiftly under the bridge during the past decades. The medical student of to-day is considering problems of ever increasing complexity and in applying the descriptive method he now must make use of the most complex aids to the senses. The experimental method is now the vogue. Dr. Osler was not unconscious of the changing order. He constantly urged the use of laboratory methods when they were of assistance and it was directly through his influence, as the writer knows, that many fundamental changes in the teaching of medicine and in the investigation of disease have taken place. He showed his everlasting youth by never opposing change. While he sounded the danger of precipitancy, yet he ever welcomed the new.

Let us never forget in our love for him as a man and in our admiration of his versatile, striking, personality, that he was one of the great students of medicine and one of its greatest teachers. He has made an impression on clinical medicine and on medical education for all time.

THE INFLUENCE OF DR. OSLER ON AMERICAN MEDICINE*

George M. Kober, M.D.

Washington, D.C.

SINCERE personal appreciation of the master work of this chieftain in the art and science of medicine, gratitude for the kindly inspirations experienced through his influence and the sanguine hope that his fair example may stimulate the younger generation to emulate his noble achievements, have prompted the writer to lay the wreath of tribute to his memory.

* * * * * *

Dr. Osler's Influence on Higher Medical Education. Dr. Osler was ever a staunch advocate of higher pre-medical education requirements, extension of the period of professional study and the substitution of laboratory instruction for didactic teaching. In his "Essay on the Need of Radical Reforms in the Methods of Teaching Senior Students," he advises teachers "to give to students an education of such a character that they can become sensible practitioners."

Dr. Osler was convinced that it is the duty of a medical school to see that the senior student "begins his studies with the patient, continues them with the patient, ends them with the patient, using books and lectures as tools, means to an end."

He persistently maintained that the ideal hospital is one connected with a medical school, with the professors members of the attending staff. In this connection he writes: "The work of an institution in which there is no teaching is rarely first class. It is, I think, safe to say that in a hospital with students in the wards the patients are more carefully looked after, their diseases are more carefully studied and fewer mistakes are made."

Osler's methods of teaching clinical medicine fitted in admirably with the general policy of the faculty that the students

*Extracted by permission from an article by the writer in the *Transactions of the Association of American Physicians*, 1919. With additional obituary note.

should be made a part of the machinery of the hospital. As a result the clinical unit was maintained in the fourth year as taught by him, but the work transferred from the out-patient department to the wards. In Osler's judgment "each man should be allowed to serve for at least half of the session in the medical wards and half in the surgical wards. He should be assigned four or five beds, and under the supervision of the house physician he does all the work in connection with his own patients. One or two of the clinical units are taken around the wards three or four times a week by one of the teachers for a couple of hours, the cases commented upon, the students asked questions and the group made familiar with the progress of the cases. In this way the student gets a familiarity with disease, a practical knowledge of clinical medicine and a practical knowledge of how to treat disease."

Though Dr. Osler disclaims any credit for his teaching method, it is nevertheless unquestionable that had it not been for his wonderful personality, enthusiastic and effective leadership, American medical education might still be fifty years in arrear of that of Europe. It required a man of his broad vision, sound judgment, a devotee to his profession and a statesman in medicine to make converts to the cause of his revolutionary ideals. Dr. Arnold Klebs has deeded us in Garrison's history an admirable pen portrait of the Doctor as clinical professor at the Johns Hopkins Hospital:

"Never can one forget the scenes in the out-patient department, where he stood surrounded by his boys, helping them as a friend in their struggles with some difficult case. He would go to one, put his arm around his shoulder and then begin a friendly inquiry, interspersed with humorous remarks and allusions to the work done by special students on a given subject. Urging, encouraging, inspiring, so we saw him, always exact, dogmatic never, and when the humorous, friendly fire kindled in his eyes we could not help but love him, and with him the task we had chosen for our life work."

We feel that we would be omitting an important page in the story of Osler's activities were we to pass over in silence those homely Saturday evening gatherings, held at the round table in his magnificent library, where he offered what Garrison characterizes as "the best models of charming essays on medical his-

tory," and estimated by Sudhoff "to contain more of the historical spirit than many learned works of the professional historian. The reason is that Osler loves his old authors as he does his profession."

These gatherings also enabled him to familiarize himself with the individuality of each student and in his charming way to offer timely and valuable suggestions as to how to solve certain intellectual and moral problems. Johns Hopkins Medical School has become known as the mother of medical teachers, and since 213 of the 453 graduates who were also his pupils prior to 1906, are or have been connected with our medical schools, it is easy to infer the extent of his beneficent influence.

Dr. Osler, realizing, as every master mind necessarily must, the value of example, ever inculcated on his student body esteem for the general practitioner and old-style country doctor. Most of his pupils will cherish gratefully the words addressed to them during class hours: "Many of you have been influenced in your choice of a profession by the example and friendship for the old family doctor or of some country practitioner in whom you have recognized the highest type of mankind and whose unique position in the community has filled you with laudable ambition. You will do well to make such a man your example, and I would urge you to start with no higher ambition than to join the noble band of general practitioners. They form the very sinews of the profession—generous-hearted men, with well-balanced, cool heads, not scientific always, but learned in the wisdom of the sick room if not in the laboratories."

Osler was deeply interested in the progress of American medicine and proud of its achievements, as shown in his address delivered at the opening of the Museum of the Medical Graduates' College and Polyclinic in London on July 4th, 1900, in which he pointed out the silent revolution which had taken place in medical education, and especially in the cultivation of the scientific branches, hospital equipment and clinical facilities:

"The most hopeful feature is a restless discontent which, let us hope, may not be allayed until the revolution is complete in all respects. Meantime, to students who wish to have the best that the world offers, let me suggest that the lines of intellectual progress are veering strongly to the West, and I predict that in the twentieth century the young English physicians will

find their keenest inspiration in the land of the setting sun."

It is quite natural that a man with such high hopes and aspirations would strongly resent any interference with the legitimate and humane methods employed for the advancement of scientific medicine.

I shall never forget the expression of scorn in his eyes and the words with which he rebuked the enemies of scientific progress, who had been heard before the United States Senate Committee on a bill for the further prevention of cruelty to animals: "The blood just surged in my veins, Sir, when I heard two men address you to-day, say things which they should have been ashamed to say of the medical profession, of men who daily give their lives for their fellows..... With reference to men who train with these enemies of the profession, I say this, that I scorn them from my heart." (See Hearing on Vivisection, February 21st., 1900, Government Printing Office, Washington). The bill failed in the committee and no serious attempt has been made to enact what Osler characterized as "a piece of unnecessary legislation."

Dr. Osler's Influence on the Profession at Large. The many invitations extended and accepted by Dr. Osler to address medical societies attest the savoury, widespread influence his career wielded over the medical community at home and abroad. His text-book, *Principles and Practice of Medicine*, graces the bookshelves of well-nigh every English-speaking physician the world over.

The medical societies, the efficient vehicle, as he took it, for the dissemination of scholarship, ever received his heartiest encouragement. Accordingly, we find him either enrolled as an active member of these societies or fostering their foundation, because, as he said to the members and friends on the occasion of the centennial celebration of the New Haven Medical Association, January 6th., 1903: "The society is a school in which the scholars teach each other, and there is no better way than by the demonstration of the more unusual cases that happen to fall in your way." Through these societies he awakened interest in postmortem work, the presentation of pathological specimens and in library equipment. Through them, also, he emphasized what a well-equipped and properly manned hospital in every town of 50,000 inhabitants could effect toward the advance-

ment of clinical medicine. Through them he felt that America would accomplish more for clinical medicine in five years than Germany could in ten.

Osler was one of the most active founders of the Association of American Physicians, organized at a meeting held in the office of Dr. Francis Delafield, New York City, October 10th., 1885. Others present at this time were Drs. William H. Draper, William Pepper, James Tyson, George L. Peabody and Robert T. Edes.

The first scientific meeting of the Association was convened in Washington, June 17th, 1886, and from that meeting until his departure for Oxford he was recorded absent from the meetings but twice. Even after his departure he attended several meetings, and was elected an honorary member in 1912. In 1894 he was elected president of the Association.

Osler was a member of the Council of the Association for a number of years and exercised a strict but just censorship over the admission of members; he was doubtless the most active and fruitful worker in that body, as shown by ten original contributions and his discussion of sixty-four papers presented by other members. He was as popular among his colleagues in the Association as a teacher as with his classes in the medical school. The young and the old were attracted, inspired and improved, and men like Jacobi and others much older than he have told him that they were glad to sit at his feet and listen to him. Since the majority of these men were occupying professorial chairs the sphere of his beneficent influence has been greatly evidenced. He was also an enthusiastic founder of the National Association for the Study and Prevention of Tuberculosis in 1904, and has been the Honorary Vice-President ever since 1905.

When Osler, over fifty years ago, stood upon the threshold of his professional life, he stood there convinced of the dignity and responsibilities of his lofty avocation. He stood there convinced that if his name were to be dug deep in the marble walls of the hall of fame, it had to be dug therein with the chisels of study, honesty, and truth. Since then he lived a lifetime of life and lived it well. He lived a lifetime of study as evinced by his numerous contributions to medical literature. He lived a lifetime of service to his fellowman, to which bore witness his contributions to preventive medicine, his active participation in the

eradication of preventable disease, his kindly ministrations to the sick poor. He lived a lifetime which was an honour to his profession and a glory to his professional brethren. A lifetime which was rewarded with every honour and trust at home and abroad which the medical community could possibly bestow upon him. He lived a lifetime of service, and during this lifetime he tempered tenderness with firmness, condescension with authority. His only protest against cares was silence. Dignity met his responsibilities; equanimity his successes and griefs, sufferings and disappointments. And as our congratulations went out to him on the occasion of his fiftieth birthday there followed the sincere hope that his days of activity might still be many to complement this lifetime that shall know no death.

Unfortunately the universal hope of Sir William Osler's friends that he might live long to enjoy the evening of his life has not been realized. The writer cannot help but feel that the days of our beloved Chief, like those of many other men and mothers, with courageous but sympathetic hearts, were shortened by the cruel world war. He lost his only son and also a nephew on the western battle fields, and his silent but intense grief, combined with overwork, did much to undermine his constitution.

The first information of his impaired health reached me in a card dated November 19th, in which he wrote: "I have been laid up for some weeks with bronchitis, but am better now." Pneumonia developed and later pleurisy with effusion, necessitating a thoracentesis. On Christmas Day he sent a cheerful, hopeful telegram to his friends at the Johns Hopkins Hospital, that he was making a good fight, but on December 29th came the end, which was felt as a shock throughout the English-speaking world. He has gone to his long home. Minerva Medica has ushered him through the portals beyond and proudly but reverently presented him to the Supreme Healer of the Universe as a type of the true physician, whose spirit will abide with us now and always!

OSLER AND TUBERCULOSIS*

JOSEPH H. PRATT, M.D.

Boston

TO all tuberculosis workers who were in close touch with Sir William Osler it must seem as it did to Louis Hamman[1] that he showed a particular interest in tuberculosis. It certainly formed one of his major subjects of study in medicine. It was a disease that in its various aspects, pathological, clinical or social, engaged much of his thought from the beginning to the end of his life in the profession he loved so well. As early as 1870 he says his attention was called to the frequency of healed tuberculosis by Palmer Howard, of Montreal, who was in the habit of pointing out the great frequency of puckering at the apices of the lungs in elderly persons. That was the earliest reference to the disease I have found in his writings[2]. In the fall of 1919, forty-nine years later, we find him on the Council of the National Association for the Prevention of Consumption and other Forms of Tuberculosis and planning an address for the coming meeting[3]. Only the illness which ended in his death prevented him from delivering it. So it is seen from this that his interest in the great problems presented by tuberculosis and his activity in solving them ceased only with life itself. If one examines carefully all the work he did in the study of tuberculosis and attempts to measure his influence in this field, one is bound to say of him as he said of Austin Flint that, among American internists of his time he stood, *facile princeps* in his knowledge of tuberculosis.

Yet I do not feel that he had the same intense interest in tuberculosis as a disease that he had in some diseases. It was not a "pet subject" with him in the way that aneurism undoubtedly was. His knowledge of the manifold aspects of tuberculosis and his many contributions that threw light on dark places and advanced science were simply the inevitable result of his "way of life", and an eloquent testimonial of the value of the "master word in medicine"—work.

---

*See also on this subject the articles in this volume by C. D. Parfitt, S. A. Knopf, Wm. Collier and Lawrason Brown.

No one can read his many papers on tuberculosis without realizing how true he was to his personal ideal to do the day's work well. He was content to "observe, record, tabulate and communicate"[4]. In his life and in his teachings he showed the abiding worth of the Hippocratic method. His publications on tuberculosis were the fruit of this daily work and they are rich in medical wisdom which, as he repeatedly pointed out, is simply knowledge made efficient. Although hardly fair to himself in saying, "I followed the line of least resistance"[5], he found in the thoroughly performed autopsy or the carefully examined case material enough not only for study and teaching, but for advancing knowledge. He was content all his life "to do what lies clearly at hand".[6] Although a prolific writer on tuberculosis as on other subjects, he never wrote, as T. McCrae[7] truly says, "for the mere sake of writing, but because he had something worthy of being written." There was a gradual widening in the scope of his work. In Montreal and in Philadelphia he dealt chiefly with the pathological aspects of tuberculosis, while in Baltimore and Oxford his studies were largely clinical and social. Concerned at first with the gross changes in tissues produced by the disease, we see him later studying the objective symptoms and signs and interested especially in the different clinical types of tuberculosis in the lungs and elsewhere. He was active at the same time in arousing the profession both to the need and means of preventing the spread of the disease, particularly among children.

A few years later we find him a leader in social measures for combatting the disease, such as the registration of cases of consumption, home visitation by medical students and later by trained nurses. He secured a fund to which he made an addition from his own purse for a special clinical study of tuberculosis. This made possible the establishment of the first rudimentary tuberculosis dispensary at Baltimore by Dr. C. D. Parfitt in 1898. He did pioneer work in the cause of education in tuberculosis and established the first special society for the study of the disease, which he called after the man who had by his life and writings been a constant inspiration in his own studies—the Laennec.

In the first tuberculosis exhibition for the public held in Baltimore, January, 1904, Dr. Osler was the "moving spirit"

and it proved a most successful undertaking[8]. He also played a leading part in the organization of the National Association for the Study and Prevention of Tuberculosis. During his last year in Baltimore, Mr. Henry Phipps, having learned of Dr. Osler's efforts in aid of the tuberculous poor, sent a cheque for $10,000 to further that work, soon followed by an additional gift of $20,000 for a tuberculosis dispensary at the Johns Hopkins Hospital. In England he was for nine years president of the Oxfordshire Association for the Prevention of Tuberculosis and was a "tower of strength" to his fellow members in carrying on the fight[9]. His interest in the clinical and pathological features of the disease continued, and as late as the spring of 1919 he gave a lecture on acute pulmonic tuberculosis before the London Tuberculosis Society. For this meeting Sir William had collected specimens from the museums of Guy's Hospital, St. Bartholomew's Hospital and the Royal College of Physicians, and photographs of these were shown upon the screen.[10]

The habit of careful observation and minute study was doubtless partly inborn and partly due to the right sort of training. William Osler was fortunate in his environment and in his teachers. While a school-boy, the love of natural history was instilled into him by the master of Trinity College School, the Rev. W. A. Johnson, whom he describes as a man of the White of Selborne type. There is now preserved in Toronto a large, beautiful cabinet built by Father Johnson, and filled with finely mounted microscopic slides. It is an eloquent witness of his devotion to natural history and to scientific investigation. Dr. Osler freely acknowledged his debt, also, to that other naturalist, Dr. James Bovell, of Toronto, who taught him the uses and importance of the microscope in practical medicine and to whom he dedicated the first pathological report to be published from a Canadian hospital (1878).

In 1870, in the middle of his medical course, Osler was drawn from Toronto to Montreal by the clinical advantages of McGill. The founders of McGill were all graduates of Edinburgh, and the traditions and methods of that school were continued in this new Canadian institution. Medicine was taught by direct observation at the bed-side and the observations and deductions made there were controlled, corrected, and amplified by the postmortem findings[11].

The years of Osler's student life at Montreal have been termed "a golden period at McGill."[12] The high quality of the clinical work is clearly indicated by the proceedings of the Medico-Chirurgical Society of Montreal published in the *Canada Medical Journal* and the many scientific articles appearing there and elsewhere. By precept and example the clinicians at the Montreal General Hospital taught the importance not only of detailed accurate observations at the bedside, but of keeping good notes of the cases. Many interesting case-reports from the hospital were published in the early Canadian journals. The good Scotch custom was followed, of giving credit to the student who made the notes. Many cases reported by students appear in the *Canada Medical Journal* and the objective descriptions are given with evident care and accuracy. Osler, while a student, reported a series of cases from the service of Dr. D. C. MacCallum, and he did this with an attention to the important details that was admirable[14]. The autopsy on a case of pleuropnuemonia was evidently his own, as Dr. Maude Abbott states, "It is described at length in the clear and systematic manner of his later pathological reports[13]."

Emphasis should be placed on the excellency of the notes that the leading Montreal physicians made on their private cases. Those published by Dr. John Reddy in a paper "on paralysis with aphasia" are models of their kind. Young Osler knew Dr. Reddy and assisted him at the postmortem on one of his cases and prepared a "very valuable wet preparation" of embolism of the middle cerebral artery.

Although he owed much to other teachers, he himself says that Dr. R. Palmer Howard was "the man from whom more than any other I received inspiration[15]." The clinical and pathological notes in Dr. Howard's published papers show the impress made upon him by his great teachers, Graves and Stokes of Dublin, from whom he probably acquired his enthusiasm for the study of medicine. Osler himself said of Palmer Howard that his work was characterized by the "careful and thorough observation of facts[16]."

Much as he gained from the example and precept of his Canadian and English teachers, Virchow was without doubt his chief exemplar in the making of detailed, time-consuming observations of the features of a case that seemed important.

In a letter written from Berlin in 1873, the year after his graduation, the young Osler[17] says, "Virchow, himself performs a post-mortem on Monday morning, making it with such care and minuteness that three or four hours may elapse before it is finished. The very first morning of my attendance he spent exactly half an hour in the description of the skull-cap." A few months later he wrote[18] that Vienna in pathology was "infinitely below" Berlin. I mention this to show the high opinion he at once formed of Virchow and his teaching. Nearly fifty years later another young graduate[3] describing Sir William Osler's ward rounds at the Radcliffe Infirmary says, "sometimes half an hour was spent in merely looking at a patient and in talking over the things that could be seen."

PATHOLOGICAL STUDIES

During the Montreal period his time was largely spent in the study and teaching of gross pathological anatomy. The motto he selected for the title page of the first pathological report from the Montreal General Hospital reveals the guiding principle of this early work: "Pathology is the basis of all true instruction in practical medicine" (Wilks). Years later Dr. Osler stated his conviction of the value of a thorough training in the method of science in purifying a man's spirit and motives. Such a training he himself obtained. "Problems in physiology and pathology," he said,[19] "touch at every point the commonest affection, and through exercise in these, if only in the early years of professional life, the man is chastened, so to speak, and can never, even in the daily round of the most exacting practice degenerate into a money-making machine."

One of his earliest studies was on the "pathology of miner's lung" (anthracosis)[20]. During the summer of 1875 he took charge of the small-pox ward of the general hospital, partly at least in order to earn money for the purchase of microscopes for his students. This gave him the opportunity to do autopsies on his fatal cases. One of these was a Nova Scotian miner who died of haemorrhagic variola. Both lungs were of a "uniform deep blue-black colour." A careful description of their appearance was written on the spot. This was followed by a thorough investigation of the distribution of carbon pigment

in the lungs and pleura.* This case formed the basis of a study of the pathology of miner's lung published a few months later. The detailed description of the lungs of this original case is admirable. It includes, in addition to the naked eye inspection and the examination with a hand lens, the study of the black fluid that exuded from the cut surface, teased specimens, and thin sections of many parts of the lungs. Although the objective description of his findings is concise, it is so extensive that it occupies nearly eight pages of text. It is illustrated with six drawings of cells and teased specimens. The entire article is a model of thoroughness and accuracy and has all the characteristics of his later and better known work. He found several other specimens at the hospital, all inadequately described previously. Microscopic examinations were made of these. Dr. Wilson Fox had suggested that the irritating substances in the air of the mines might directly induce the production of tubercles and that the fibroid masses represented the final change which these had undergone. "Against any such view," Osler said, "these cases here speak strongly." Osler concluded that the essential change in the structure of the lungs was an increase in the fibrous elements—a genuine cirrhosis. He proved the extraneous origin of the carbon by the detection of fossilized vegetable tissue in the form of scalariform and dotted ducts. This first case made a lasting impression upon Osler and a portion of his protocol will be found in the section on the morbid anatomy of pneumoconiosis in all the editions of his text-book. His study included five experiments on kittens. These proved that a fluid, containing coloured particles, injected into the lungs was quickly taken up by the cells, and when introduced into the axilla it finds its way to the costal lymphatics and the anterior mediastinal lymph nodes. He did not publish his paper until he had carefully read the available literature. It is evident that he was as keen then as later regarding the original account of any disease he studied, for he states that it was Pearson in 1813 who first described the affection.

A subsequent case of anthracosis in a Cornish miner was reported a few years later from his clinic by a student[21]. This is also mentioned in the text-book. It confirmed the conclusion

* These specimens are preserved to-day in the McGill Museum—*Editor*.

made from his earlier study that the change produced by carbon dust is an essential fibrosis.

On May 1st, 1876, he was placed in control of the autopsies that were made at the Montreal General Hospital. Up to that time they were done by the physicians in charge of the cases during life. The autopsies were done by students under Dr. Osler's direction, but he wrote the notes on the spot. The first year's report comprised 100 autopsies. These included twelve cases of phthisis, but only two of them he regarded as worthy of note. One of these was a fibroid contraction and induration of the entire right lung. In the other, perforation of the lung had occurred with resulting pneumothorax. There was a third, but only reported because of cancer of the spine. His interest in fibrosis was doubtless due to his study of the miner's lung. During his later Montreal period he reported other cases of fibroid disease of the lungs. The cause of haemoptysis was to him one of the most interesting features in phthisis. He reported two cases of rupture of the pulmonary artery in his second pathological report. He searched carefully then, and later in Philadelphia, for aneurisms of the pulmonary artery on the walls of cavities, and obtained some fine specimens.

One of his earliest clinical lectures to appear in print was on fibroid phthisis and in it we get his own reaction to the complexities that phthisis then presented to students[22]. "There is no disease," he said, "that you will have greater difficulty in thoroughly understanding than phthisis. . . . . It is, in fact, at present the bugbear of medical students, particularly in their last year. This is owing in great part to the inherent complexity of the subject, and in part I am sorry to say, to the exceedingly diversive theories and views which at present prevail upon the pathology of the disease." Even the simplest classification of phthisis, as he termed it, into pneumonic, tuberculous and fibroid varieties, seems very confusing to us today. Before Koch's discovery, Dr. Osler says in his text-book, "we repeated the striking aphorism of Niemeyer, 'the greatest evil which can happen to a consumptive is that he should become tuberculous'." Dr. Palmer Howard never accepted the heresy of Virchow and Niemeyer that in a simple pneumonia the exudate might undergo caseation and phthisis result; but apparently Dr. Osler's opinion was too much influenced by his

great master Virchow. Dr. Howard's views[23] were confused and he did not believe that "tubercle or consumption may be produced in the human subject by the absorption of caseous or other products of inflammation," nor did he hold, as did Flint[24], in the "essentially tuberculous nature of pulmonary phthisis." Speaking in 1900, Dr. Osler said,[26] "Koch's brilliant demonstration of the tubercle bacillus had a hard up hill fight to recognition. The vested interests of many minds were naturally against it, and it was only the watchers among us, men like Austin Flint, who were awake when the dawn appeared." On another occasion in a lecture at the Phipps Institute, he said, "many in this audience like myself had to see the truth grow to acceptance with the generation in which it was announced."[26] Few were in advance of William Osler, however, in demonstrating the bacillus of tuberculosis after Koch published an account of his epoch-making discovery. This was published in the *Berliner klinische Wochenschrift* on April 10th, 1882, and the following August at the meeting of the American Association for the Advancement of Science held in Montreal Dr. Osler[27] gave a demonstration of this micro-organism. Physicians and even workers in pathology were slow in acquiring the technique of staining tubercle bacilli. As late as April, 1885, Dr. Osler[28] showed a slide of pus from the urine in a case of tuberculosis of the kidney with the tubercle bacilli stained. This was at a meeting of the Pathological Society of Philadelphia. Dr. Shepherd[29] is the authority for the statement that Osler was one of the first to insist on the contagiousness of tuberculosis and the possibility of transferring bovine tuberculosis to man.

There was one form of pulmonary tuberculosis that interested him keenly from the day he first saw the lungs of a case in the autopsy room of the Montreal General Hospital. That was acute pulmonic tuberculosis. The clinical note was brief. The patient was ill about ten weeks, fever, cough, death from haemoptysis. The description of the left lung, solid and heavy, weighing 1,490 grams, the seat of a dry caseous pneumonia is a vivid word picture. In the second pathological report the protocol is given in full.[30] A brief extract of this appears in the first edition of the text-book. The appearance presented by this lung, firm and airless except for a small margin at the lower part, made a lasting impression upon him. Twenty-five years

later in a paper presented before the Brooklyn Medical Society he read again his autopsy note on this lung.[31] The comment on the case when first published shows conclusively that Osler was drawn astray by the false teaching of Niemeyer and explains why he included himself when years later he said, "as Plato shrewdly remarks, we are not all awake when the dawn appears."[25] Writing in 1879, or thereabouts, of the case just mentioned Dr. Osler says, "the whole appearance is what might be supposed to proceed from an unresolved pneumonia, which has gone on to caseation, and in the upper lobe to extensive softening. The caseous areas which arise in connection with tuberculous phthisis are never in my experience so extensive and do not involve a whole lobe in such a uniform manner."[30] Doubtless he and Dr. Howard had many discussions on this vexing problem. It could not be settled by the naked eye or microscopic study of the tissues, but required the bacteriological methods of Koch to prove the unity of tuberculosis and phthisis. Before Koch's discovery Osler admitted that the difficulties in the study of phthisis made it "the bugbear of the medical student". Advance of knowledge enabled him to say, in 1904, that "there is much to make pulmonary tuberculosis one of the most interesting and satisfactory diseases for you to study." No type of tuberculosis ever interested him so much as acute pulmonic phthisis. Although a rare condition, he had collected twenty-three cases at the time he presented his last paper[10] on the subject in March, 1919.

Dr. Osler always emphasized the importance of examining the sputum for elastic tissue in all cases of suspected disease of the lung, but especially tuberculosis. Alas, that the men brought up on his text-book pay, as a rule, so little attention to his advice. The simple method he used and described in his text-book was shown to him at the London Hospital, in 1872, by Sir Andrew Clark. In pointing out the value of the microscope in diagnosis in the prospectus of his first practical course on the institutes of medicine, Dr. Osler said, "satisfactory evidence can be obtained by it of the occurrence of softening in a lung, by a careful examination of the sputa even before the physical signs give any such indication."[32]

In Philadelphia he made many autopsies at the Blockley Hospital on cases of tuberculosis. When he began to write his

text-book he had the experience obtained from 1,000 autopsies on all of which he had written the protocols. This included 275 cases with tuberculous lesions. He made many valuable observations on tuberculosis of the meninges, the lymph nodes and serous membranes, as every student of his text-book knows.

During his active years in the postmortem room he had a series of anatomical tubercles or postmortem warts on his hands —eight or ten during a period of fifteen years. These are due to direct infection of the skin by the tubercle bacillus. Although he states that general invasion of the system has apparently resulted from them, he was evidently not apprehensive himself, as he allowed one to develop without treatment. It gradually reached the size of a ten cent piece and then remained quiescent. It finally disappeared after a duration of seven months. He makes two references to this personal experience in his writings.[33, 34]

Dr. Osler's clinical knowledge was based on the solid rock of pathological anatomy. His works and career were founded, as Dr. Welch pointed out, on the study of natural history. His mind was that of a naturalist. He was interested in accurate record of observable facts, not in hypotheses. He had the instincts of a collector and developed them along the highest lines.

Clinical Investigations on Classification, Symptomatology and Diagnosis

Not until Osler began his career at Johns Hopkins did his published studies deal with the clinical aspects of tuberculosis. His first paper, written in what might be termed his transition period between the pathological and the clinical investigation of tuberculosis, dealt with the diagnosis of tuberculous bronchopneumonia in children.[36] He reported that he had made the diagnosis on several occasions by the discovery of tubercle bacilli in the bronchial secretion that children had vomited. Then for the first time the clinical observations on the cases are given with the same accuracy and fullness as the pathological in his earlier work.

The first patient to be admitted to the medical wards of the newly opened Johns Hopkins Hospital (May 18th, 1889) was a case of tuberculous peritonitis, and his first clinical mono-

graph on tuberculosis dealt with the peritoneal form of the disease.[37] Only four cases had occurred at the hospital at the time he made his report, but they were worked up and reported in detail. In addition he collected 357 cases from the literature and the study was enhanced by the knowledge gained from seventeen postmortems, which increased his personal series to twenty-one cases. Dr. Osler's friends have often commented on his extraordinarily retentive memory. This rare gift enabled him to remember, as he states in this study, that Sir William Jenner, in the Session of 1872-73 at the University College Hospital, London, pointed out that pigmentation of the skin, simulating that in Addison's disease, was an occasional symptom of tuberculous peritonitis. Osler showed for the first time that peritoneal tuberculosis was often a latent affection and that spontaneous healing took place more frequently than had been supposed. He brought forward new evidence of the value of laparotomy in the treatment, and collected twenty-six unreported cases in which it had been performed. Probably the most original and valuable feature of this work was the contribution made to the diagnosis of abdominal tumors—using the word tumor in the clinical sense. He classified the different types of tumors due to tuberculous disease of the peritoneum and emphasized their frequency.

Tuberculosis of the serous membranes interested him especially at this time. He was one of the first in America to recognize the tuberculous origin of pleurisy with effusion.[38] In 1893, he published clinical studies on tuberculous pericarditis[39] and pleurisy[40]. Both were based largely on statistical data obtained from his own clinical and pathological experience, and presented with detailed notes. This series of three papars shows the influence of Louis was as great on Osler as on the American physicians of an earlier period who had been the pupils of the founder of the numerical system. The same year, 1893, a month before he gave the Shattuck lecture on tuberculous pleurisy in Boston, he prepared a paper for the meeting of the American Paediatric Association on tuberculosis in children[41]. In this he expressed surprise at the few observations made on the frequency of tuberculosis among the inmates of hospitals and asylums for children in this country. Aroused by the startling prevalence of the disease among little children, he

insisted that a paid pathologist ought to be attached to every one of these institutions and report yearly on the prevalence of the disease. If continued for four or five years this investigation "would not only throw important light on the prevalence of this scourge, but would also give indications of the best means for its prevention." This was the first public health measure he advocated in connection with tuberculosis. The wisdom of his advice was less apparent then than now, when tuberculous infection in childhood is regarded as the common cause of manifest disease in later life.

During his first five years at Hopkins most of his clinical writings on tuberculosis appeared. In addition to those already mentioned was a valuable paper on toxæmia in tuberculosis. He discovered that relatively small foci of disease in the lymph nodes and elsewhere might produce symptoms of profound intoxication[42]. He wrote during this period a monograph on tuberculosis in children[43], and contributed the article on tuberculosis to the Loomis-Thompson System of Medicine[44]. This contained an analysis of 427 successive cases of phthisis studied at the Johns Hopkins Hospital.

In 1903 he called attention to the similarity of the clinical picture, in certain cases of tuberculosis, to typhoid fever, and reported three cases[45]. One of these patients was a senior student in the school. The family had criticised Dr. Thayer severely for not making a correct diagnosis at the onset. Dr. Osler took this occasion to state that he himself thought the case typhoid fever, when he left the city in June, and that Dr. Thayer had written on the record—continued fever (pneumonia or tuberculosis). In truth the diagnosis was impossible at the time.

The fine points of percussion and auscultation of the lungs did not interest him. In his Oxford days Sir William would say to his students, "I am afraid I have not a musical ear."[3] I remember in Baltimore his delight in telling of the acumen of the physician who wrote, "I am sending you a patient who has a cavity at the top of the right lung the size of a walnut *without the shell.*" Only one communication dealt with the physical diagnosis of phthisis. That was a short note on the presence of the coin sound over a large tuberculous cavity in the right upper lobe[46].

VIEWS AND TEACHING ON TREATMENT

Dr. Osler's teaching regarding treatment reflected the current views and developed with the growth of knowledge. In his first published clinical lecture[22] on tuberculosis (1881) the patient shown had active advanced disease. "Nothing special need be said with reference to treatment," he told his students. "It is entirely a treatment of symptoms." The triumphant advance of medicine caused a revulsion of "feeling from an attitude of oriental fatalism." It was Edward L. Trudeau apparently who convinced Osler of the value of fresh air and sunshine in the healing of tuberculosis. Osler first met Trudeau in Baltimore at a meeting of the Climatological Association in May, 1887, and heard him report his important experimental work on inoculated rabbits. Those confined in a damp dark place soon died, while those allowed to run wild, recovered or showed slight lesions. This work Dr. Osler described in the first edition of his text-book, and added that it is the same with human tuberculosis. He stressed the importance of fresh air, sunlight, and the maintenance of a maximum degree of nutrition. The rule was laid down that the patient should be kept out of doors for the greater part of the day. The Adirondacks were recommended for early cases. "As the reports of Saranac show," he added, "recent tuberculosis does remarkably well. Personally, I have seen better results from the Adirondacks than from any other place."

At the time (1891) this section on treatment was written Dr. Osler was taking a position in advance of most of his contemporaries. That same year I was a freshman at Yale and my room-mate developed symptoms of early pulmonary tuberculosis with fever. Professor Brush, Dean of the Sheffield Scientific School, desirous that everything possible should be done for the poor lad, had the leading physician of New Haven called in consultation. This distinguished professor never mentioned the importance of fresh air, or food, or the danger of infection. He did not suggest Dr. Trudeau's sanatorium, which was only a day's journey distant, or even the advantage of a change of climate. On one thing and one only was he insistent and that was the necessity of administering pure beechwood creosote! One should not judge this physician too severely. He showed,

as a matter of fact, by his suggestion that he was up to date in therapeutics and read the leading medical journal. Only two years before Dr. Beverly Robinson, a distinguished physician and clinical teacher of New York, had urged in a paper read before the Association of American physicians and published in the *American Journal of the Medical Sciences*, the great value of creosote in the treatment of consumption provided *pure beechwood* creosote only was employed. In this and in an earlier paper entitled, "Modern methods of treatment of pulmonary phthisis" (1885), no reference was made by Dr. Robinson to the out of door or climatic treatment. In a clinical lecture delivered at the Bellevue Hospital Medical College in October, 1885, six months after Dr. Osler had demonstrated the presence of tubercle bacilli in the urine in a case of tuberculous kidney at the Pathological Society of Philadelphia, and three years after he had shown the bacilli at Montreal, Dr. Robinson (*New York Medical Journal*, 1885, 42, 536) speaks thus to his students: "Only a few months ago the chorus of the supporters of Koch was somewhat after this fashion—'What is consumption? The bacillus. What is the bacillus? Consumption. But what causes consumption? Why, the bacillus. But what causes the bacillus? Consumption'. And now I ask, in the words of Professor Loomis, whether they (these microbes) are the *cause* or the *scavengers* of the disease?"

I mention these facts not in any attempt to cast discredit on good men and good physicians, like Dr. Robinson and Dr. Loomis,* but to show what Dr. Osler and others had to contend against. His own experience taught him the truth of Locke's statement, "The truth scarce ever yet carried it by vote anywhere at its first appearance."

In the third edition (1898) of the text-book he wrote a new section on the open-air treatment and gave credit to Brehmer for the successful inauguration of the sanatorium treatment and praised highly the work of Trudeau. In his discussion of Professor Clifford Allbutt's paper on tuberculosis at the Portsmouth meeting of the British Medical Association in August, 1899, he urged the hygienic-dietetic treatment for the ninety per cent. who could not leave their homes and advised for the first time

* We should never forget that it was Dr. Alfred L. Loomis who made Dr. Trudeau's early work in the Adirondacks possible.

rest "so long as fever was present."[46] Many others spoke, but only two besides Osler mentioned rest.

In 1901, in the fourth edition the importance of rest for the febrile case was emphasized in this book. Even then he would allow patients with a temperature of 100.5° to be up and about. In earlier editions he had said it was well for patients with a temperature above 101° or 102° to be at rest.

His first paper on treatment was delivered at the meeting of the Medical and Chirurgical Faculty of Maryland at Westminster, November, 1899. It was on this occasion that sleeping out of doors was first advocated. Conclusive evidence of its value was presented by Dr. C. S. Millet, of Brockton, Mass. The topic Dr. Osler selected was home treatment. Two cases seen the previous spring impressed upon him forcibly the familiar fact "that our theoretical knowledge of this disease has, as is so often the case, not reached a practical working basis." The shocking conditions he had witnessed were described. In a small house in South Baltimore he saw a lad, one of five children, who had been ill with tuberculosis for months. The room was stuffy and hot, both windows shut. Some expectoration was visible on the floor. "He had high fever, loss of appetite and was being fed on panopeptone and beef extracts. The room had a good exposure and I suggested to the young man to have the bed moved to the window, to be well covered up, and to rest in the sunshine during part of every day. The reply was that it would kill him and I could see by the mother's looks that she was of the same opinion. The doctor, too, I am afraid, regarded me as a fanatic."

In this address he gave a detailed account of the progress of a case of active febrile tuberculosis in which the treatment he outlined had been faithfully followed for months. "Last spring," he continued, "I happened to be in the town in which this girl lived and I fortunately thought of her and paid her a visit. She lived in a small two-story house, with a narrow balcony on the first floor behind, and here at half past eleven one morning I found her carefully wrapped up." He saw her again in his consulting room, December 1st, 1899, shortly after the Westminster meeting. "Luckily," he says, "I dictated a note on the condition of the lung at the time of her first visit, (November, 1898) otherwise I should not have believed the extent of the change."

Four years later in his lecture[26] at the Phipps Institute he referred again to this young woman. "The remarkable case I reported in 1900 gave me great encouragement as the complete arrest of the disease was accomplished under the most primitive surroundings by the persistence and devotion of the patient herself, who richly deserves the good health she enjoys to-day."

In the 1909 edition of the text-book he stated that the success of my tuberculosis classes showed "how much may be done by care and instruction. . . . . As not five per cent. of the patients can be dealt with in sanatoria it is surprising and gratifying to see how successful the home treatment may be. Even in cities the patients may be trained to sleep out of doors and the results obtained by Pratt, Millet and others are as good as any that have been published."

In the last edition which he lived to see in print (1912) he endorsed the "judicious rest, proper exercise" treatment employed at the King Edward Sanatorium at Midhurst, and the plan of graduated work developed by Paterson at Frimley.

I was unable to convince him of the value of prolonged bed rest in the treatment of afebrile active disease. In January, 1917, I sent him a copy of a paper on results obtained by the class method of home treatment.[49] The large percentage of patients who remained well for years after returning to work I attributed to the use of prolonged rest. "That is a fine record," he wrote under date of January 28th, 1917. "The papers came this morning and I have read them with the keenest interest. I am afraid one element you have not laid proper stress upon—your own personality. Confidence and faith count for so much with these cases. The personal supervision and care is all important and not taking too many cases. I will speak of your results at the annual meeting of our County Association next week." I now regard the evidence then presented of the truth of my claim as not convincing and hence his criticism was justified. Later I showed that prolonged bed rest yielded far better end results than the system of graduated work employed by Paterson, or the rest-exercise system carried out at Midhurst by Bardwell. As Sir William knew the strong personality of both Paterson and Bardwell I am confident he would have changed his explanation of my results. Out of 100 patients, whose sputum had been positive on admission, discharged from

Frimley (graduated work) with wage earning power restored, at the end of seven years, only twenty-two were able to work, and thirty-nine per cent. of the Midhurst cases (rest and exercise), while seventy-six per cent. of my patients (prolonged bed rest) were well and working. The difference in results seems too great to be accounted for by any possible difference in the personality of the physicians who supervised the treatment, and with this I think Sir William would agree.

EDUCATIONAL AND PUBLIC HEALTH ACTIVITIES

As early as 1894 Dr. Osler [50], read at a special meeting of the College of Physicians in Philadelphia a plea for the registration of pulmonary tuberculosis. He showed patience and perseverance in the attainment of this measure in his own state. Maryland moved slowly at that time in improving the wretched sanitary conditions then existent. Finally in April, 1901, on the invitation of Dr. Osler, Dr. L. F. Flick, of Philadelphia, went to Baltimore and delivered an address on the compulsory notification of tuberculosis. Philadelphia and New York had already made this requirement and Dr. Osler urged that Maryland do likewise. Less than a year later at a public meeting in McCoy Hall he thrilled his hearers, whom he addressed as "long suffering, patient, inert fellow citizens," by his forceful and courageous speech. As a result of this address and others made on the same occasion the State legislature of 1902 took action by creating a Tuberculosis Commission. "All that is progressive or worthwhile in the tuberculosis crusade in Maryland followed thereafter" (Jacobs).[8]

In 1898, a special fund was secured for research on tuberculosis by Dr. Osler, which enabled Dr. Parfitt to devote his time to this work. "He saw," writes Dr. Parfitt,[51] "a great opportunity in a field in which in North America, there were as yet few workers. The plotting of lung blocks by Biggs in New York City had suggested the segregation and more intensive study of dispensary cases." All the consumptives that came to the dispensary were assigned to Dr. Parfitt. Home visitation was begun. The social service work was continued after Dr. Parfitt left by three medical students—Miss Epler, Miss Dutcher and Miss Blauvelt—in succession. "The tuberculosis clinic is a very different department now from the modest dispensary

arrangements of a physician without a room to work in and with no other equipment but his stethoscope. But this is the fruit that has grown from that tiny seed of interest and enthusiasm planted by Dr. Osler many years ago" (Hamman).[1]

The first meeting of the special society for the study of tuberculosis, founded by Dr. Osler, was held in the Johns Hopkins Hospital, October 30th, 1900. This society—the Laennec—was the first of its kind in the country, possibly in the world. The introductory address[52] by Dr. Osler considered (1) the general relation of tuberculosis, (2) some special features of the disease as a subject of study, and (3) the physician as a student of tuberculosis. At the same meeting the investigation of conditions in the homes of one hundred and ninety consumptive outpatients was reported by Miss Dutcher[53]. It revealed a disregard of cleanliness and elementary hygiene that made massive infection of the healthy members of a family seem inevitable.

During his last year in Baltimore he took an active part in planning the organization of the National Association for the Study and Prevention of Tuberculosis. He was regularly present at the meetings of the committee and was influential in securing the election of Dr. Trudeau as the first president.[54] Just before sailing for England, Dr. Osler delivered an address[55] at the first annual meeting. On that occasion he urged a campaign of education for the public, the medical profession, and the patient. Every general hospital, he said, should admit some tuberculous cases to educate the doctors, students and nurses in the proper treatment. "The public is awake," he said, "sitting on the edge of the bed, not yet dressed, but still it is an improvement even to get the public awake."

In England Dr. Osler actively supported the work of the local and national organizations in the tuberculosis crusade. He made many addresses, but only two of these have I found in print. In 1907 he gave a lecture[56] preliminary to the opening of the Tuberculosis Exhibition at Dublin that was termed by the Lord Lieutenant a "trumpet call—a call calculated not only to awaken, to stimulate and inspire, but also to lead and direct." During the war he took up the problems of the tuberculous soldier at the 1916 meeting of the National Association.[57] He lamented the lack of a general staff in England which should wage the next thirty years' war against consumption.

MEN AND BOOKS

No account of Dr. Osler's work on tuberculosis would be complete without some reference to the inspiration and help he gave to those of his friends who were engaged in warfare against this dreaded foe of the race. Readers of his Autobiography know what this encouragement and aid meant to Dr. Trudeau. The beautiful tribute to Trudeau written by Osler[58] should not be allowed to remain in its ephemeral form—the pages of a monthly magazine. Dr. Osler's crisp epigrammatic notes of encouragement brought joy and gladness to the hearts of tuberculosis workers everywhere. No one can estimate, not even the men themselves, the importance of Osler's influence on the development of Lawrason Brown, Charles D. Parfitt, Louis Hamman and others.

Dr. Osler honoured and admired the great physicians of the past who had made possible the modern knowledge of tuberculosis and loved to linger over their writings. He published an historical sketch of that English worthy, Richard Morton,[59] who was one of the first to give a good account of the symptoms of consumption and to appreciate fully the contagious nature of tuberculosis. Osler's students were repeatedly advised to read Laennec, and I have heard him refer to Louis's *Phthisis* as still the best work on the clinical aspects of the disease. Among the treasures he collected was a manuscript of Laennec.[60] It was "the obituary notice (written May 12th., 1816) of one of the most lovable of men—Gaspard Laurent Bayle." The first accurate description of the tubercle was made by Bayle and "his monograph (1810) is still one of the landmarks of our knowledge of the disease." Upon acquiring an original copy of George Bodington's essay[61], for which he had long been looking, he wrote a sketch of that pioneer of the open air treatment. How it came into his possession is interesting. It seems that Sir William met in consultation one day in Winchester, Dr. Arthur E. Bodington and "immediately asked what relation he was to the well known physician of the same name. He replied, 'His grandson'. Then I said, 'Well perhaps you are the man who can give me a copy of his essay' and to my delight he said he had one to spare."

A LAST WORD

It is fitting that an account of Sir William Osler's relation to tuberculosis should close with what he termed a "last word" on the subject of tuberculosis to the general practitioner. "*The leadership of the battle against the scourge is in your hands. Much has been done, much remains to do. By early diagnosis and prompt, systematic treatment of individual cases, by striving in every possible way to improve the social condition of the poor, by joining actively in the work of the local and national antituberculosis societies you can help in the most important and the most hopeful campaign ever undertaken by the profession.*"[62]

(1) HAMMAN—Osler and the tuberculosis work of the hospital. *Sir William Osler, Bart. Johns Hopkins Press,* Baltimore, 1920, p. 65.
(2) OSLER—Healing of Tuberculosis, *Climatologist,* 1892, ii, 149.
(3) MALLOCH—Sir William Osler at Oxford, *Can. Med. Assoc. Journ.* Sir William Osler Memorial Number. July, 1920, p. 60.
(4) THAYER—Osler, the Teacher. *Sir William Osler, Bart., The Johns Hopkins Press,* Baltimore, 1920, p. 51.
(5) MACCALLUM—"A Student's Impression of Osler". Memorial Number, *Can. Med. Assoc. Journ.,* July, 1920.
(6) OSLER—*A Way of Life,* New York, 1913, p. 18.
(7) Preface to the Ninth Edition of Osler's *Principles and Practice of Medicine,* 1920.
(8) JACOBS—Osler as a citizen and his relation to the tuberculosis crusade in Maryland. *Sir William Osler, Bart.* Baltimore, 1920, p. 81.
(9) MALLOCH—*Loc. cit.,* p. 56.
(10) OSLER—Acute pneumonic tuberculosis, (Abstr.), *Lancet,* 1919, i, 615
(11) ABBOTT—Pathological Collections of Osler. This volume, p. 188.
(12) ABBOTT—McGill's Heroic Past. *McGill University Publications,* Series VI, Montreal, 1921, p. 27, also this volume, p. 190.
(13) ABBOTT—Classified bibliography of Sir William Osler's Canadian Period. Memorial Number, *Can. Med. Assoc. Journ.,* July, 1920, 104, and this volume.
(14) *Canada Medical Journal,* 1872, viii, 107.
(15) OSLER—The master word in Medicine. *Æquanimitas.* Second Edition, Philadelphia, 1906, p. 369.
(16) OSLER—Obituary—R. P. Howard, M.D. *Med. News,* Phila., 1889, liv, 419, also Editorial, *Ibid,* p. 383.
(17) OSLER—Berlin Correspondence. *Canada M. and S. J.,* 1874, ii, 314.
(18) OSLER—Vienna Correspondence. *Canada M. and S. J.,* 1874, ii, 453.
(19) OSLER—Remarks on Specialism. *Boston M. and S. J.,* 1892, lx, 542.
(20) OSLER—On the pathology of miner's lung.* *Canada M. and S. J.,* 1876, iv, 145.
(21) DAWSON—*Canada M. and S. Journ.,* 1879, vii, 452.
(22) OSLER—Clinical lecture on a case of phthisis. *Canada M. and S. J.,* 1880-81, ix, 741.
(23) HOWARD, R. P.—*Canada M. and S. J.,* 1874, ii, 207.
(24) FLINT—*Treatise on the Principles and Practice of Medicine,* Philadelphia. Fifth Edition, 1881, p. 194.
(25) OSLER—An Address on the Importance of Post-Graduate Study, *Lancet,* London, 1900, ii, 73.

(26) OSLER—The home in its relation to the tuberculosis problem. *First Annual Report Henry Phipps Institute.* Phila., 1905, 141.
(27) *Proceedings of the American Association for the Advancement of Science.* Thirty-first meeting held at Montreal, August, 1882. Salem, 1883, 528.
(28) OSLER—Tubercle bacilli in the urine. *Trans. Path. Soc., Phila.*, 1885-87, xiii, 215.
(29) SHEPHERD—New York Academy of Medicine. Special meeting in memory of Sir William Osler. *N. Y. Med. J.*, 1920, iii, 921.
(30) *Reports clinical and pathological by the medical staff of the Montreal General Hospital,* Montreal. Edited by W. Osler, 1880, i, 295.
(31) OSLER—Acute tuberculous pneumonia. *Brooklyn Med. J.*, 1905, xix, 57.
(32) OSLER—Introductory remarks to the Practical Course on the Institutes of Medicine. *Canada M. and S. J.*, 1876, iv, 204.
(33) OSLER—Clinical Memoranda. *Montreal M. J.*, 1888-89, xvii, 418.
(34) OSLER—*Loomis-Thompson System of Practical Medicine,* New York and Philadelphia, 1897, i, 731.
(35) WELCH—New York Academy of Medicine. Special meeting in memory of Sir William Osler. *N. Y. Med. J.*, 1920, iii, 923.
(36) OSLER—Diagnosis of tuberculous bronchopneumonia in children. *Archives of Paediatrics,* 1891, viii, 825.
(37) OSLER—Tubercular peritonitis. *J. Hopk. Hosp. Repts.*, Balt., 1890, xi, 67.
(38) OSLER—Report of four cases of tuberculous pleurisy with autopsy. *Trans. Path. Soc. Phila.*, 1887-89, xiv, 160.
(39) OSLER—Tuberculous pericarditis. *Am. J. M. Sc.*, 1893, n.s. xv, 20-37.
(40) OSLER—Tuberculous pleurisy. *Tr. Mass. M. Sc.*, 1893, xvi, 47-112.
(41) OSLER—Notes on tuberculosis in children. *Arch. Paed.* 1893, x, 979.
(42) OSLER—Toxæmia in tuberculosis. *Practitioner,* Lond., 1894, lii, 26.
(43) OSLER—*Amer. Text-book Diseases of Children,* ed. Starr, Phila., 1894.
(44) OSLER—*Loomis-Thompson System of Medicine,* 1897, i, 731.
(45) OSLER—Typhoid fever and tuberculosis. *Am. M.*, 1903, vi, 1015.
(46) OSLER—Is the coin-sound distinctive of pneumothorax? *Montreal Med. J.*, 1895, xxiv, 969.
(47) OSLER—Discussion of Professor Clifford Allbutt's paper. *British Medical Journal,* 1899, ii, 1155.
(48) OSLER—Home treatment of consumption. *Maryland Medical Journal,* 1900, xliii, 8.
(49) PRATT—Results obtained by the class method of home treatment in pulmonary tuberculosis during a period of ten years. *Transactions of the twelfth annual meeting of the National Association for the Study and Prevention of Tuberculosis,* 1916, xii, 128.
(50) OSLER—The registration of pulmonary tuberculosis. *Philadelphia Polyclinic,* 1894, iii, 65.
(51) PARFITT—Osler as an incentive. *Canadian Practitioner,* June, 1922, xlvii, 244-247; also this volume, p. 328.
(52) OSLER—On the study of tuberculosis. *Phila. Med. J.* 1900, vi, 1029
(53) DUTCHER—Where the danger lies in tuberculosis. *Philadelphia Medical Journal.*1900, vi, 1030
(54) TRUDEAU—*An Autobiography.* New York, 1916, 210.
(55) OSLER—Address of the Vice-President, National Association for the Study and Prevention of Tuberculosis. *Transactions of the first annual meeting,* Washington, D.C., 1906, i, 20.
(56) OSLER—What the public can do in the fight against tuberculosis. *Ireland's Crusade against Tuberculosis,* Vol. I, Dublin, 1908, 17.
(57) OSLER—An address on the tuberculous soldier. *Lancet,* 1916, ii, 220.

(58) OSLER—Edward L. Trudeau—an appreciation. *Journal of the Outdoor Life*, 1910, vii, 162.
(59) OSLER—The "Phthisologia" of Richard Morton, M.D. *Medical Library and Historical Journal*, 1904, ii, 1.
(60) OSLER—Letters of Laennec. *Can. Med. Assoc. Journ.*, 1912, ii, 247.
(61) OSLER—George Bodington. *Can. Med. Assoc. Journ.*, 1912, ii, 526.
(62) OSLER—*The principles and practice of medicine.* Seventh edition, New York, 1909, and subsequent editions.

SIR WILLIAM OSLER'S PART IN THE MEDICAL HISTORY OF THE WAR AND THE ORGANIZATION OF THE BRITISH MEDICAL WAR MUSEUM

J. GEORGE ADAMI, C.B.E., M.D., F.R.S.

Vice-Chancellor of the University of Liverpool

INVITED to contribute to this memorial number, I found myself in a dilemma. Away from Montreal, its collections and records, the one apposite subject regarding which I felt I could write with some authority was the part Sir William Osler played in the development of the British Medical War Museum, yet, as the sequence shows, I could not do this without referring to myself also, which I, naturally, did not wish to do. It is, therefore, only as the result of a reiterated appeal from the Editor that these lines are written. If I have to mention my own part in the matter, my main object is to demonstrate that Osler was the essential agent, the impelling force, in securing the official Medical History of the War and its corollary, the organization of a War Medical Museum.

All who were intimate with Sir William will remember his high appreciation of those many and heavy tomes which constitute the Medical and Surgical History of the War of the Rebellion, and, closely associated with these, the Surgeon-General's Museum and Library at Washington. To him, indeed, I owed my own

introduction to the great Washington collections. It was not unnatural, therefore, that with this experience of what had been accomplished in the United States in connection with its war records of the 'sixties, and of Sir William's particular interest in the matter, I wrote to him from Canada expressing a hope that he would take action, so that England should no longer be behind the other leading nations; we ought to start preparation betimes; obtain proper statistics and case histories and, like Washington, have a worthy War Museum. I kept no copy of this letter. In my original manuscript (written for this Memorial Bulletin in February 1921) I wrote—"some day, possibly, it may come to light in the War office files." And it has. In the preface to the first volume of the "Medical Services; General History" of the Official "History of the Great War" published at the end of 1921 Major-General Sir W. G. Macpherson gives an abstract of the letter, and its date, 25 September (p. viii).

Osler's reply, dated 9 October, 1914, reads:

"That is a very interesting suggestion. As far as I can see from the work at the Base Hospital here, the histories and reports of cases of wounded, of which we have had about 600 already, and the reports on the operations, are very good. The difficulty is that they are all filed away, and nobody has the time subsequently to work up the material as a whole. I will send on your letter to Keogh, the new Surgeon-General. A letter to the 'Lancet' on the lines you have written would be very helpful.

The country is in great form, everybody working, and recruits coming in splendidly. I have been going about in some of the camps talking to the men on the general subject of health, and particularly about typhoid innoculation."

The next mail brought another letter, dated 12 October:

"Here is a part of a letter from Keogh, who is evidently very favorable to your suggestion. I will get him to send on your letter to Bradford, Herringham and Wright."

In accordance with his suggestion I wrote to the "Lancet." I see that my letter of 20 October appeared in the number of 7 November, 1914. In that letter I called attention to the fact that we possess no complete medical history of any of the numerous wars in which the British Army has been engaged during the last century; that in this War the Royal Army Medical Corps would be a foremost factor, our success depending upon the reduction of preventable disease to a minimum and upon the preservation of the greatest possible number of the men of our not too large Army in a state of health; that such a history must be (1) official

and (2) based upon precise data; that the number of voluntary agencies engaged in territorial and other hospitals, unfamiliar with precise official methods made for imperfection in the records; that the supervision of such work could well be undertaken by medical men of standing (not mere clerks) who being over age would gladly be of service along these lines.

My impression was thus that to Sir William's keenness and energy and influence we owe the Medical History of the British forces in the Great War, and its concomitant, the formation of the most valuable war museum, now housed, as regards its pathological section, in the Royal College of Surgeons in Lincoln's Inn Fields, as regards hospital and other material in the Imperial War Museum at the Crystal Palace; he it was who, through his influence, set the ball rolling.

My endeavours to confirm this impression afford an interesting example of the difficulties in the way of obtaining precise historical data in war time. The natural presumption would be that I had only to apply to those most nearly concerned to obtain confirmation or otherwise—to Sir Alfred Keogh, for example, and Sir Walter Fletcher, Secretary of the Medical Research Committee, who became largely responsible for organizing the collection of material both for the History and the Museum.

But think of the organizing and administrative strain of those early months of the War! Men like Sir Alfred and Sir Walter were at their posts for from fourteen to sixteen hours a day. They had no time to keep diaries: the need for immediate action was such that they learnt very soon that to depend upon official correspondence meant to waste a fortnight or more before coming to a decision, whereas half an hour's conversation between principals would enable them safely and promptly to determine points of policy of the first importance. The records subsequently demonstrate that an important decision had been reached, but there may be nothing to show precisely when it was reached, or who was the prime mover in originating the change or the new policy.

In this particular instance the matter was complicated by the fact that with the beginning of the War the Medical Research Committee offered its services to the Government. It was indeed a happy accident that funds and an organization were there at this particular juncture for the study of War Medicine and Surgery.

The help afforded and the work accomplished by the Committee has been beyond praise.

Even in England few realize the manifold activities of that Committee; in America owing to the parsimonious policy of British Government Departments in the distribution of their publications, the great work accomplished by it is still less known. To make matters clear it is necessary that I briefly refer to its origin and functions.

The Medical Research Fund established by Mr. Lloyd George under Section 16 of the National Insurance Act of 1911, consisted of an annual sum calculated at the rate of one penny in respect of each insured person in the United Kingdom. For the year 1914 the sum thus available amounted to about £55,000. The distribution of this sum was in the hand of a larger "Advisory Council" of 42 members and a smaller executive "Medical Research Committee" of 9 members. It was determined in 1913 that while part of the funds at their disposal should be devoted to work centralized in laboratories under their control and carried out by a staff to be directly appointed by the Committee, the other and larger part should be allocated to the support of workers and their investigations in University and other laboratories and institutes throughout the Kingdom not directly under their control. These general principles had been approved in December, 1913. The Committee purchased the Mount Vernon Hospital on Hampstead Hill for the purpose of a Central Institute and so had allocated a considerable part of its income for the next few years. This building was well-known to the Canadian authorities in England, as, in November 1914, it was ceded to the War Office and given over to No. 1 Canadian Stationary Hospital, and for weeks, until ordered to France, that unit was busied converting it to military purposes. Later, it was once again well-known when it became the Hampstead Heart Hospital with Sir William Osler, Sir Clifford Allbutt, Sir James Mackenzie and Dr. (now Sir) T. Lewis as its consultants, and Major Meakins C.A.M.C. and Captain Cotton C.A.M.C. as members of its staff. But with this scheme for a Central Research Institute the Committee had already constituted four departments and had selected and appointed staffs for the same, namely, Bacteriology under Sir Almroth Wright; Bio-chemistry and Pharmacology under Dr. H. Dale, F.R.S.; Applied Physiology, under Sir Leonard Hill, F.R.S. and

Statistics under Dr. John Brownlee. These appointments, along with that of the Secretary, were made just before the onset of the War, in July, 1914. I mention this to show that the collection of medical statistics was regarded from the first as an important function of the Research Committee.

And with the beginning of the War the Committee offered its services to the Government. "The changed circumstances" (I quote from the 1st Annual Report of the Medical Research Committee) "and the sudden call for medical and pathological assistance in military directions interfered greatly with the plans of the Committee, but their revised schemes were submitted to the Minister on the 31st October 1914, together with an explanation of certain preliminary lines of policy which the Committee proposed to follow in making grants in aid of Research." The list of schemes then submitted also contained proposals for special work to be undertaken by the Committee in direct connection with the War and for the assistance of the Army Medical Department. The schemes submitted to the Minister on 31st October are given in detail in the British Medical Journal of the 5th of December, 1914. It deserves note that they included a proposal approved by the Army Council, that the Statistical staff of the Research Committee should undertake the whole of the work dealing with the medical statistics of the War. It is true that nothing is said regarding the Medical War Museum. But might not the one be included in the other? Any History of the War must be based upon records, and whoever collected statistics must collect records.

It was when I came to enquire at the fountain heads that I could obtain no precise information.

I wrote to Sir Alfred Keogh, but his answer leaves it vague as to whether Sir William Osler or the heads of the Medical Research Committee (Lord Moulton, its Chairman, or Sir W. M. Fletcher, its Secretary) first approached him, the former in direct reference to the Medical History and the War Museum, the latter in reference to the collection of statistics.

He wrote to me (5 January, 1921):

"I have a very clear recollection of Osler's coming to me very early in the War, to discuss with me not only the subject of collections for museum purposes but the matter of collecting information generally, for he very clearly foresaw that we were 'in for it' on the medical and surgical side for good or evil. It was obvious to him that an immense mass of material would be available. I have myself never been a great lover of statistics. The effects of disease and wounds and deaths in war are only too evident *every*

day in any War Office by reason of the demands for reinforcements. War officials do not depend upon after-war information for knowledge of this kind . . . . But the collection of scientific information and the establishment of a research organization in war are matters which make a special appeal to me. At, or about, the time of Osler's conversations with me (for I had several) Lord Moulton and Sir W. Fletcher came to see me and offered the resources of the Research Committee for scientific work and statistics. This relieved us of establishing our own organization . . . . I am not very clear as to subsequent proceedings. My memory is rather blurred. When I once disposed of a thing to any responsible body I never interfered further except to afford help when I was asked to do so. The delegation of details to executive bodies left me free to do the administrative work of the several campaigns—to help to win the war, which was the first consideration. But two stages of great importance were taken; the delegation to the College of Surgeons of the Collection of Specimens for us and the establishment of the Museum connected with Jaw Surgery. Osler was greatly interested in both, and I have reason to know was satisfied that, speaking generally, we were, at the War Office, acting up to his ideals. There was certainly no one who was better acquainted with what we were doing, and I am indebted to him for much good advice with regard to certain difficulties and certain persons."

Similarly, Sir Walter Fletcher possessed no definite data to show that he had approached Sir Alfred Keogh in the matter of a medical history or a medical museum prior to Sir William Osler, but admittedly it was through the Research Committee and his power of organization that both were made possible. He threw himself into the matter with characteristic energy.

What finally convinces me that it is to Sir William's enthusiasm that we owe both developments is that fact noted by General Macpherson that on November 11, 1914, without reference to the Medical Research Committee and before the proposals of that body regarding the collection of medical statistics had been confirmed by its Advisory Council (on November 17) the Director-General had appointed Lieut.-Colonel, then Captain, F. S. Brereton, R.A.M.C., to undertake the duty of preparing material for a medical history of the War. It was only later, in March 1915, that a consultative Committee for the Medical History of the War was appointed under the D.G.M.S. with Sir Walter Fletcher and Lieut. Colonel Brereton as joint secretaries.

I conclude, therefore, that Major-General Sir W. G. Macpherson is correct in stating that "shortly after these arrangements for collecting material for a medical history of the War had been made, Sir Walter Fletcher, then Dr. W. M. Fletcher . . . proposed that the services of his Committee should be placed at the disposal of the Army Medical Service, to assist in the preparation of the Medical Statistics of the War."

As showing the close association between the historical

and the museum work it is interesting to note that in November 1917 Lieut. Colonel Brereton became responsible for the medical section of the Imperial War Museum, visiting the different battle fronts and collecting material illustrating the work of the medical services from front to base including sanitary appliances and objects of historical interest.

With regard to the Pathological material, and its disposal, as indicated in Sir Alfred Keogh's letter, Osler took a most active part.

The Royal Army Medical School had a prescriptive right to receive this, and indeed the R.A.M.C. College at Millbank possessed a museum. But this was a passive, not an active institution —not one of which the College could be proud—a jumble of some few, but very few, interesting specimens of a pathological nature from various recent campaigns, of bullets of various orders and their effects, of various curiosities of nature picked up in various parts of the world, presented by travelled members of the R.A.M.C., and of trophies of the chase. But the room was meagre and already fairly full, and on enquiry it became evident that Millbank afforded no space for expansion. What was more serious was that the preparation of pathological specimens of bones and other organs needs the services of an expert curator and of skilled preparateurs. The Army Medical College possessed neither the one nor the other. And men devoted to museum work are few and far between. There was little hope of bringing together and organizing a proper staff out of the R.A.M.C. during the war. If the material collected during the War was merely dumped and piled up at Millbank to be arranged and mounted in the piping times of peace, it was a certainty that three-fourths of it would be lost.

I remember many talks over the matter with Sir William and Dr. W. M. Fletcher. There was one institution, and one only, that had the staff and the space and that might appropriately receive what are national collections. The staff, it is true, was greatly 'minished and brought low' by the War, but those remaining were the best museum workers in England, and Professor Shattock, the Curator, and Professor Keith, the Hunterian Professor, were equally the greatest pathological and anatomical museum experts. It may not be generally known that the great Hunterian museum in Lincoln's Inn Fields is a national museum.

John Hunter's collections were bought by the nation after his death and deposited in the care of the Royal College of Surgeons, The question was whether the Army Medical authorities would see things in the same light. I remember that Sir William and Dr. Fletcher both saw Sir Alfred Keogh and gained his assent. The difficulty was solved by Dr. Fletcher applying to the Council of the Royal College of Surgeons and that body most patriotically offering to receive and care for all pathological material from the hospitals at the front, as well as for pathological material from the hospitals in Great Britain, and what is more, the materials collected by the medical services of the Dominions, caring for and conserving the latter until such time as it might be transported. Canada and Australia owe a heavy debt to the Royal College for its help at this juncture. But for this they would have fared badly.

It is perhaps scarcely proper to indicate what part was played by Sir Arthur Keith and Sir Ernest Shattock in bringing about this happy result. I can only quote a letter received recently from Sir Arthur Keith.

"The Army Medical Museum (W.O. collection) sprang out of the proposition for a Medical History of the War; I don't know actually, but I always supposed that Osler was the prime mover in getting the Medical History Committee set up and bringing Morley Fletcher in. I was working for the College simply when the Medical History Committee stepped in and made us recipients and custodians of the Army Collection."

So well did the College care for and even mount the material that it was possible for the Canadian material to be placed upon exhibition in 1918, prior to its removal to Canada.

OSLER, THE MEDICAL EDITOR

Henry W. Cattell, A.M., M.D.

Editor of the International Clinics, Philadelphia

ACCORDING to the good old Calvinistic doctrine, with which Osler was as familiar as a Hodge or a Schaff, editors, like poets, are born, not made. And Osler was a born medical editor, of the best type, like Gould and Foster. Coming of proper stock, with a suitable environment, imbued with a love of nature, the boy prepared for the ministry. But the man was not predestinated to have the pulpit be his mode of teaching the principles of Christ to a later day civilization. With the zeal of a Jesuit, but with the honesty of purpose of a Socrates or a Lincoln, the slim, energetic William Osler, the personification and embodiment of what was best in the man and in the physician and in the writer, many-sided and erudite in his learning, easy in the expression of his thoughts by pen or tongue, the quintessence of editorial sagacity and versatility, had a mission to perform, which did not lead him to the stake like a Servetus, and the keynote to this mission was the proper performance of the day's work, without too frequent introspections. The memories of the winsome personality of Dr. Osler will pass away, his spoken word is no longer heard, but the written and printed thoughts remain, and upon them will rest the future reputation of Sir William Osler. And fortunate it is that these words are many and of a character worthy of the great man that we knew in the living flesh.

And there were giants in those days working in Philadelphia during the time Osler passed with us as the professor of clinical medicine in the University of Pennsylvania and as chief editorial writer for the *Medical News*, to name but three of the scientists, Leidy, Cope, Muybridge, and his two associates at the Infirmary for Nervous Diseases, the portly Wharton Sinkler, the type of the southern gentleman and scholar, with his courtly and courteous manner to rich and poor alike, and the austere Weir Mitchell, the perfector of the rest-cure, the describer of erythromelalgia, and the creator of Hugh Wynne. Let me quote

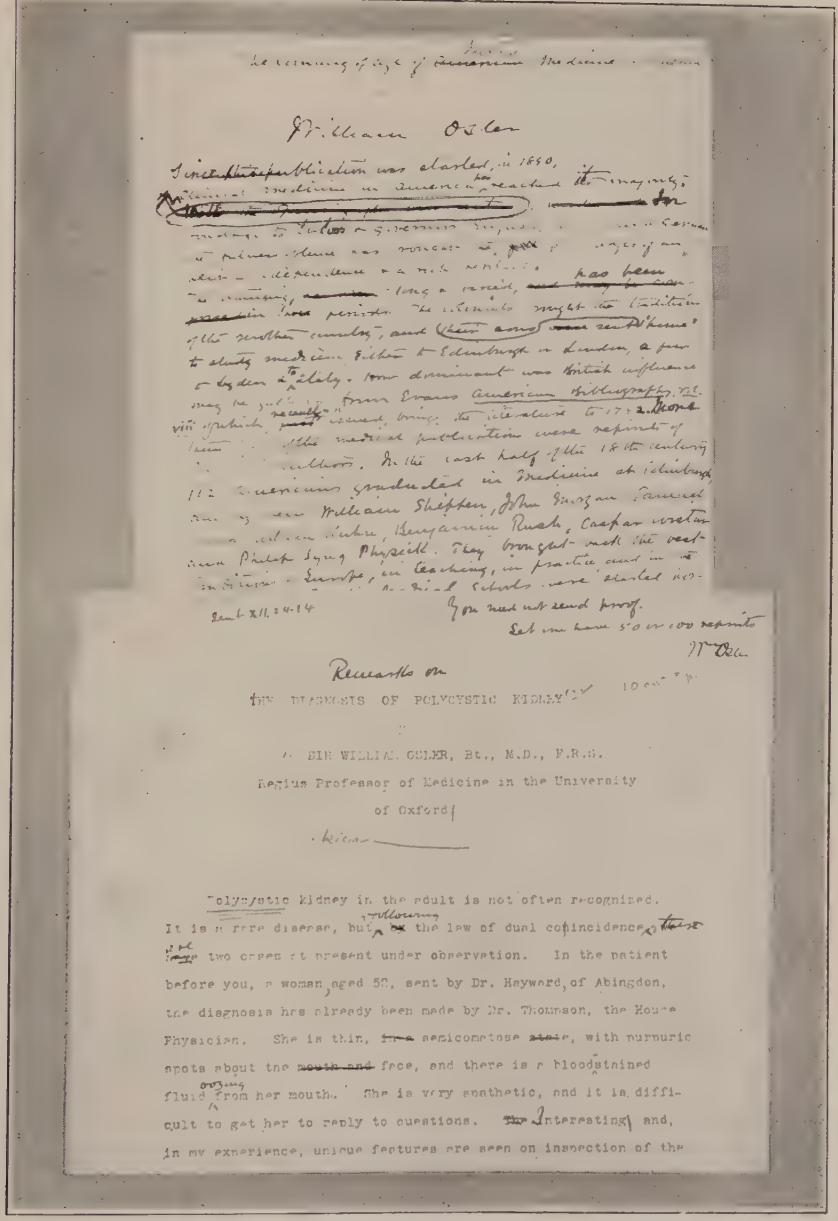
in its entirety one of Osler's book-reviews, from this period which will show him perhaps in a new light to many, but illustrates, better than anything else, his fine editorial instinct and his fearlessness in stating what he considers to be the truth.

"This work, the author tells us, was suggested by his own necessity; for, after reading all the modern works on the subject, he felt that there was wanting a small, handy manual suitable for the general practitioner and student. We sincerely trust that active professional duties at High Wycombe will prevent his reading all the modern works on any other subject, lest a similar compulsion should seize him, and result in the production of another such dull, toneless compilation as the present volume."

Osler was a most careful and capable proof-reader, as will be seen by examining the tops of the first pages of the two manuscripts reproduced herewith (Fig I), and used for the typesetting of these articles for the pages of the *International Clinics*, of which he was one of the collaborating editors for seventeen years. It will be noted that one of the manuscripts, written in World War days, is entirely in his own handwriting. Such reliance had he upon his own accuracy and such confidence in "Mr. Smarty", as a proof-reader is known in the printer's vernacular, that he writes to me on one of them: "You need not send proof." Only once do I recall his passing an absolute error.

For some forty years Osler was a front-page writer for the medical press, and by this is meant that practically all of his articles appeared at the start of the issue of the publication in which the communication is found, both on account of the value of the material contained in the paper and of his being so well and favorably known in the territory in which the journal circulated. Thus during the year 1894 Dr. Osler's lectures on the diagnosis of abdominal tumours were published in eleven parts in the *New York Medical Journal*, then a weekly, all of which but one occupied the premier positions, while in the *International Clinics* for 1914 two of the four volumes start with a paper by him. It took a discovery like that of a Röntgen to dislodge him to second place, as in the February, 1896, issue of the *International Medical Magazine.*

While in Paris during the Summer of 1895 I had occasion to consult Osler's *Practice of Medicine*, and went to the University Library for the purpose of securing the desired information. There were some 150 readers of all ages in the large read-



Sent XII, 24-14

You need not send proof.

Let me have 50 or 100 reprints

W. Osler

Remarks on

THE DIAGNOSIS OF POLYCYSTIC KIDNEY

by

SIR WILLIAM OSLER, Bt., M.D., F.R.S.

Regius Professor of Medicine in the University

of Oxford

Polycystic Kidney in the adult is not often recognized. It is a rare disease, but, following the law of dual coincidence, there are two cases at present under observation. In the patient before you, a woman, aged 56, sent by Dr. Heyward, of Abingdon, the diagnosis has already been made by Dr. Thomson, the House Physician. She is thin, sallow, semicomatose, with purpuric spots about the mouth and face, and there is a blood-stained fluid oozing from her mouth. She is very apathetic, and it is difficult to get her to reply to questions. Interesting and, in my experience, unique features are seen on inspection of the

FACSIMILE OF PAGE OF OSLER'S CORRECTED MANUSCRIPT.

AMERICAN PILGRIMAGE TO LOUIS' TOMB, MONT PARNASSE, OCTOBER, 1905.

Whitman Norton Pearson Evans
Klebs McCarty OSLER Magnin
Kayserling Jacobs Brannan
Beyer Knopf Lowman Pottinger

ing room, and I noticed that the first series of the Index Catalogue of the U. S. Surgeon General's Office and the already published six volumes of the *Index Medicus* were in constant use. Approaching the good-natured old librarian, the request was made for Osler's *Practice,* and very shortly thereafter the information was imparted that the book was not in the library and that the librarian had never heard of the author! Noticing my look of amazement, this custodian of priceless books and manuscripts again went to the voluminous files, and finally brought out with an air of triumph two monographs by *facile princeps* the leader of English medical thought, one on tumours and the other on infantile paralysis! And what is the lesson to be derived from this perhaps trivial incident, if not the reason for Doctor Osler's greatness as a medical editor? He was familiar with German, French and Italian literature while the leaders of medical thought on the continent, notwithstanding their unusual opportunities for keeping abreast with the best English thought through the great influx to their clinics of students from the English speaking nations, had neglected their opportunities, feeling, perhaps, that nothing good could come out of Nazareth.

Do you remember that little pocket note-book of Osler's that always contained just the reference that you wanted upon the subject that you were especially interested in, and from which he supplied you the information so cheerfully and graciously, and yet didn't look too good, nor talked too wise, in the so doing? It is thus that I like to remember Osler, furnishing desired and useful information for the instruction and upbuilding of his fellow practitioners, for after all, editorial greatness consists in understanding the wants of those within and without your own sphere of life and in getting out of them the best that it is within their power to give, for Gray's *Elegy* contains a truth too often forgotten. If this knowledge of human nature be not used for personal aggrandisement and in moulding events to meet selfish ends, as did Napoleon, but in aiding those with whom one comes in contact to meet successfully the daily struggles of life and thus prepare for the betterment of mankind in the future, then one has true nobleness of purpose and fruitful results. And such was, is, and will be, the editorial greatness of Osler.

OSLER IN VACATION

HENRY BARTON JACOBS, M.D.

Baltimore, Md.

ALL the world knows Sir William Osler as a clinician, teacher, and author, but comparatively few could have known him in his hours of relaxation, so it has occurred to me that a few words on this phase of his life might not be uninteresting in this collection of tributes to his personality, his scholarship and his medical attainments.

It was my good fortune to be privileged, during many of his most care-free years, to be with him in vacation, and surely it was a privilege; then the real character of the man appeared when all the formalities and compelling duties were laid aside and the real self with its thoughts, tastes and aspirations appeared. When I speak of his most care-free years, I refer to that time between his coming to Baltimore in 1889 and the breaking out of the War in 1914—a period of 25 years in which very hard work was interrupted nearly every summer by two or three months of change of scene and more or less complete relaxation. To intimate that his fertile mind was ever dull or inactive during these periods would be to convey entirely a misconception. It often seemed that in these vacations his thoughts were more keen and original than even in his days of work, but they were allowed to run into new channels with a spirit of boyishness and fun which captured the interest and admiration of all those about him. Then would appear those most truly characteristic traits of his nature, the love of his fellowmen, the love of service to others, and his unbounding youthfulness of spirit. To these might be added great reverence for the past with its heroes of contemplation and discovery, and great respect for the slowly moving yet beneficent laws of nature, often referred to by him as good old Doctor Time. The joy of living was ever uppermost in his mind coupled with the desire of giving joy to his companions. Many illustrations of these traits come to me to confirm my words.

In the summer of 1900 he with his family was spending some weeks at a small seaside resort called Swanage in the south of

England, not far from Bournemouth—a most charming, quiet, simple place with a lovely outlook upon the sea and the headlands of the Isle of Wight, and with an excellent bathing beach. He thought I might enjoy the place and suggested my coming. I arrived and went to the attractive little family hotel of the village where I saw myself most comfortably established for my stay. Hardly had I gotten my luggage into the house when Dr. Osler appeared, full of apologies that he missed me at the station and insisting that I must next morning come to his home, that though it was rather full of visitors, yet he and Mrs. Osler had planned to make room for me. This illustrated his hospitality—his unlimited hospitality—which was such a marked trait of his character that both in Baltimore and in Oxford his home was ever known as the haven of all comers. To make my stay in Swanage happy seemed to be the sole end of his thoughts during my visit. We bathed, we made excursions, one to the old ruined Corfe Castle where we had tea on the grass of its overgrown ramparts. We drove to Salisbury to visit the cathredral, and we found pleasure in golf upon the downs, the wonderfully interesting southdowns with their beautiful views of the sunny shore and the glistening sea. Nearby are the neighboring outskirts of the real Thomas Hardy country, and much pleasure was derived by an excursion which brought us into these outskirts where the interesting suggestion of many a Hardy rural picture was to be seen. Into all these undertakings Dr. Osler entered with the enthusiasm of a boy, outlining to us all the history of this or that object seen, constantly drawing upon his inexhaustible fund of knowledge, whether of literature, or local history, or of the hidden secrets of human nature.

On another occasion Dr. Futcher and I spent a few days with him at Old Point Comfort. Never were there more delightful days! We made friends with the officers of the Fort, every one of whom was eager to show Dr. Osler attention, and he in turn just as eager to lighten for an hour the dreary humdrum of their lives. We went to Hampton and explored its Institute. We took a day on the small steamer which makes the tour of the little known, but most interesting and beautiful Mobjack Bay; had luncheon with the captain, a unique character—so interesting and so hospitable. For our delectation and to appease our consuming appetites he chose the largest oysters ever seen and

then showed great disgust with us that we did not know how to swallow them at a single gulp, so with a readiness which bespoke capacity and capability, as well as delight, he demonstrated how the thing should be done. It was a subject of remark that in the whole day but one or two poor little calves, or pigs, and a few potatoes were secured from off the land, though we passed along the most beautiful and fertile shores, stopping here and there at rather dilapidated wharves run out into the bay, where with these exceptions the whole merchandise or cargo was obtained from the productive waters of the bay in the shape of oysters, fish and crabs. It was evident that the population of the whole region was dependent upon the bay for support. Of course this fact was of intense interest to our company, and a subject for rumination to our philosophic Osler.

In the two or three days following a trip of exploration was made to the Dismal Swamp, and as would seem altogether appropriate, Dr. Osler carried with him for reading an early edition of Burton's "Anatomy of Melancholy."

One of my most interesting summer visits with the Oslers was in London. They had an apartment at 40 Clarges Street, Mayfair, a very comfortable, family hotel, where I, too, secured a room. This was a very memorable visit for me, for I saw more of London under favorable auspices than either before or since. Dr. Thomas McCrae and Dr. Harvey Cushing were there, too, the former taking the examinations for his membership in the Royal College of Physicians, the latter studying with Victor Horsley. We were a jolly party. We explored London from the tops of omnibuses; we visited the well known bookshops, the libraries and museums of the Royal Colleges of Physicians and Surgeons, seeing the Gold-Headed Cane of Radcliffe and the collections of John Hunter, the portraits, busts and memorabilia of many distinguished men of medicine. Nothing interested Sir William Osler more, or aroused his enthusiasm to a higher pitch, than this search for the great things in medical history which London afforded. I can never forget his excitement over the proposed purchase of a remarkable medical library for which a friend of medicine in Baltimore had offered him a large sum. It was to be sold at auction; day by day we visited it to look over the books and to consult with the auctioneers as to what they would probably bring if sold in a block. The day of the sale

came. Dr. Osler was prepared to outbid any comer, for it was a unique collection, so his disappointment and indignation may be imagined when the auctioneer on opening the sale announced that the owner had accepted a private bid and the collection was withdrawn from public sale. If the books could have been procured they were to go to the Johns Hopkins Medical School, and would have enriched its library beyond words. In the collection was the only copy I have ever seen and touched of the original edition of Rabelais' translation of the "Aphorisms of Hypocrates."

In Cannes one spring we had several wonderful days together. He had been in Venice with his family and brought to us a very remarkable series of photographs taken by his son, Revere; remarkable because his son Revere was but a boy of twelve or fourteen, and yet he had found and photographed some of the finest bits of details of palaces and churches which existed in Venice. These pictures indicated a power of observance and discrimination far beyond the boy's years and were indicative already of an unusual mind. This, of course, was a source of great pride and satisfaction to a most devoted father. Dr. Osler had never been in Cannes before and he took the greatest pleasure in seeing the beauties of the place, the Casino, the Corniche Road, but even more pleasure in looking up old friends who, on account of ill health, had sought the Riviera. I remember with what delight he found an old medical friend much improved after many months in Switzerland and Cannes, and his satisfaction in finding Mr. Joseph Chamberlain able to see him after what had been thought to have been a final breakdown. Nor must I forget one beautiful afternoon spent on the golf links of Cannes, where his interest in the ancient game showed no abatement.

I recall with great pleasure the summer of 1905 when we were together in Paris for the International Congress of Tuberculosis. Many of his friends, English and American, were there and the days were full of meetings and the evenings of dinners. Wherever he went he was, so to speak, the feature of the occasion. His inimitable way of winning every one, happy and cordial manner, fascinating smile and talk, his magnetic personality, ever made him the centre around which all gathered.

It was here at a dinner given by one of the French professors that the medal of Charcot, recently done by Frederick Vernon

was shown us, and the suggestion made that Dr. Osler should let Vernon undertake one of him. This suggestion was followed up the next day; several sittings were given, photographs taken, and as a result the bronze plaque showing that most lifelike of all the portrayals of Dr. Osler's face in which his marked intelligence and unusual personality is so distinctly shown; in some respects, considering the medium, perhaps even better than in the great painting by Sargent.

A happy incident of this Paris visit was Dr. Osler's idea that it was a most fitting occasion for the Americans present, and through them the American medical profession in general, to show their appreciation of and their debt to the renowned clinician and teacher, Louis. To this end Dr. Rupert Norton, who at that time lived in Paris, was requested to find out where Louis was buried. This proved to be a task of some moment; curiously enough, the French physicians, of whom inquiry was made, could not tell. Then recourse was had to the library of the Academy of Medicine, and after much search, an obituary notice was found in a contemporary medical journal which told of his burial in the cemetery of Mt. Parnasse; a trip to this cemetery was made; the guardian found who fortunately remembered exactly the location of the family tomb. So the group of Americans were gotten together and with a very large wreath of laurel leaves and roses, emblems of appreciation and affection, on a rather chilly and rainy afternoon, we proceeded to Mt. Parnasse and were conducted to Louis' grave. Here Dr. Osler gave a most interesting informal talk upon the life of Louis; the value of his work in confirming and establishing Laennec's researches in tuberculosis, and the great impetus he gave to the study by his own numerical method; also the great debt American medicine was under to him through those early students from Boston, New York, Philadelphia and Baltimore, who brought back from Paris the new ideas and became the teachers of them in their several localities. Dr. Klebs, then of Chicago, had the kodak with him, and I am glad to be able to show the photograph which was taken of this American group gathered at the tomb of Louis.

An incident of this vacation in Paris, whether ever before told or not, I am uncertain, was the way in which President Roosevelt's invitation was secured to the International Congress to come to America in 1908. The American representatives of

the National Association for the Study and Prevention of Tuberculosis were instructed to invite the next Congress to America. This invitation was presented by Drs. Flick, Jacobs and Beyer, but immediately they were told that the Congress only went to those countries to which it was invited by the head of the Government. Italy was after the Congress, and had its government's invitation. Here was a quandary. We were in Paris and our Government three thousand miles away wholly uninformed and probably uninterested. One of us happily thought of Dr. William H. Welch, he who still succeeds in all he undertakes. We made up a telegram to him on the chance of his being in Baltimore, requesting him to see Mr. Roosevelt, secure the desired invitation and forward it to the American Ambassador in Paris. *Osler* signed the telegram. It worked like a charm; Dr. Welch received the message, went to Washington, saw President Roosevelt, secured the invitation and the American Ambassador delivered it to the Congress the next day, and the International Congress of Tuberculosis came to Washington in 1908.

Never to be forgotten are the vacation days spent in Oxford after the colleges were closed. The eagerness and enthusiasm with which Dr. Osler made me see the interesting things in this old university town can hardly be described. He loved the place and all it contained, its history, its architecture, its quadrangles, its libraries, its hospitals, its laboratories, its museums Here at Christ Church where his hero, Burton, was a scholar, he was proud to have been made a Fellow. The Bodleian with its treasures and traditions was his constant delight, and he exhibited the sacred volumes with a reverence which could but impress his companions with similar feelings. In Oxford surely Dr. Osler found consolation for his soul—where the old and the new meet together, the past and the present, the past which he revered, the present which he loved as few love the on-coming life of the world.

In Oxford I will leave him in a year before the War, happy in his work; happy in his distinctions; happy in his beautiful home with his devoted wife and brilliant son; happy in the troop of boys and girls, English, Canadian and American, who filled his house at tea-time every day; happy with his precious books, little dreaming of the years of trial and anguish ahead. Gone are the days,—but Osler still lives.

SIR WILLIAM OSLER AS A BIBLIOPHILE*

LEONARD L. MACKALL

Savannah, Georgia

IT seems peculiarly appropriate that this Society should take its action on the death of Dr. Osler, in the Hotel Chelsea, since he always stayed here on his many visits to Atlantic City. Few knew it at the time, for he used to register under an assumed name, usually that of some old medical worthy, which enabled him to enjoy the necessary rest and relaxation for which he had come and yet was identification enough to his best friends, who were merely amused by his various ingenious aliases.

Once at the New York Academy of Medicine a librarian asked him to write his name in the register, and was later much surprised to find instead, "Miss Persimmons" written in a well-known hand![1]

Some fantastically wonderful quasi-medical letters signed, "Egerton Y. Davis, Jr.," in various journals were really written by Dr. Osler, who greatly enjoyed the consequent mystification of readers lacking in a sense of humour—especially as a really authentic, though scarcely less extraordinary narrative, published seriously under his own name, was to his surprise regarded as a mere hoax.[2] His sense of humour was always active, and he often indulged in playful and practical jokes.

Seldom surely has a living man received a finer tribute than the unsentimental yet eloquent personal articles in the special Osler[3] number of the *Johns Hopkins Hospital Bulletin*, issued for his seventieth and last birthday. Professor Gildersleeve, dean of American philogists, at eighty-eight, contributed some charming verses, ending:

> "His winged words straight to their quarry go.
> All hearts are holden by his meshes yet."

---

*Extracted from an article in *The Papers of the Bibliographical Society of America*, Vol. XIV, Part I, 1920, Chicago, 1922.

[1] Cf. *Bulletin of the Medical Library Association*, July, 1919, p. 6.

[2] *Canada Medical and Surgical Journal*, XVI, (1888), 377, 734; XVII, 557, *New York Medical Journal*, XLVII, 332, 412; *Medical Record*, XXXIII, 97, cf. *Literary Digest*, January 17, 1920, p. 50.

[3] July, 1919, reprinted in book form, 1920.

A more elaborate and more general tribute, intended for the same birthday (though unfortunately delayed for months by printers' strikes, etc.)[4], are the two handsome volumes of *Contributions to Medical and Scientific Research*, consisting of some 150 papers by as many pupils and co-workers in the United States and Canada. Another very interesting series of tributes, chiefly upon his earlier days, is the Sir William Osler Memorial Number of the *Canadian Medical Association Journal* published in July, 1920.

Dr. Osler's constant anxiety to aid even strangers in any serious scientific work was well illustrated by his cordial welcome to Dr. Crous, the young representative of the Prussian Commission on a General Catalogue of *Incunabula*, whose second paper before the Bibliographical Society (London) states that it was mainly Dr. Osler's kindness and notes of introduction which gave him access to the *incunabula* in England.[5] This reminds me to add that when during the war almost everyone in Germany was obsessed with a fantastically wild hatred of everything in English, Dr. Osler's German colleagues Ewald (of Berlin, now dead) and von Müller (Munich) remembered him with affection; and the latter has written a sympathetic notice on learning of his death.[6] Similarly, though his only child was killed in the war, he was among the first to come to the aid of the really suffering children of Austria.

Revere Osler had gradually formed an interesting collection of English Books, mainly of the Tudor and Stuart periods, to which his father had added most of the non-scientific works from his own fine library. Soon after their son's death his parents presented this whole collection to the Johns Hopkins University, with a suitable endowment to form a "Tudor and Stuart Club" (somewhat similar to the well-known Elizabethan Club at Yale), which will, under such circumstances, be very deeply appreciated, and will undoubtedly prove of the greatest value and interest to

---

[4] But pp. xvii and 1 to 142 of Volume I and pp. ix and 651 to 654 only of Volume II were formally presented in the Hall of the Royal Society of Medicine, London, July 11, 1919. Sir William's very striking reply is printed in the *B. M. J.*, July 19, 1919; also in *Annals of Medical History*, N. Y., Vol. II, No. 2.

[5] *Transactions of the Bibliographical Society*, XII, 182-87 (London, 1914); cf. pp. 87-99, and Sir William's paper, "The Proposed General Catalogue on *Incunabula*," read before the Medical Library Association at Washington, May, 1913, published in its *Bulletin*, April, 1914.

[6] *Münchener medizinische Wochenschrift*, February 27, 1920.

the students of that University—a cherished memorial to both father and son[7].

Only a word can be said here on Sir William Osler as a Bibliophile. He tells us himself: "Books have been my delight these thirty years, and from them I have received incalculable benefits. To study the phenomena of disease without books is to sail an uncharted sea, while to study books without patients is not to go to sea at all."[8] He knew well the monumental Index Catalogue of the Surgeon-General's Library and the *Index Medicus,* and used them constantly to great advantage, but the personal touch in Atkinson's *Medical Bibliography* (1834, A-B only) delighted him, and he calls it "the most fascinating book on the subject ever written"[9]. His book of addresses, *Æquanimitas,* concludes with a wise and striking page headed, "Bed-Side Library for Medical Students," naming ten books, including his favourite, Sir Thomas Brown's *Religio Medici.* But he taught the love of books not by word only. Our "Resolutions" mention what might be called his "book clinics" for medical students. In Baltimore he formed also a small informal dining-club which he named "The Ship of Fools." It was so agreeable that, when he was leaving Baltimore for Oxford, the members presented him with a magnificent *Henriade* ("Londres, 1741"), inscribed by Voltaire to his *Physician* Dr. de Silva[10]—surely a very fitting application by others of the principle on which Dr. Osler himself always so generously and unselfishly acted: "The true bibliophile has a keen pleasure in seeing an important document in its proper home."[11]

His own great library cannot be even vaguely described, but its general classification is indicated in the following quotation from a letter (to L. L. M.) (dated August 6th, 1918):

> "My library continues to grow and I am trying to get a proper Catalogue.....If not on right, at any rate my scheme will be on interesting lines. I have divided the library

[7] *Cf. Johns Hopkins University Circulars,* 1919, Feb. p. 19, and Dec. pp. 17, 127, and Prof. J. C. French's article, *J. H. Alum. Mag.* June 1923.

[8] "Books and Men," *Æquanimitas,* p. 220; *B. M. and S.,* Jan. 17, 1901.

[9] *Canad. M. Ass. J.* July, 1913, p. 612. Cf. Dibdin's Bibliographical Tour in.....England, 1838, I, 211-216; II, 1080; *also now Ruhräh in Ann. Med. Hist.* VI., No. 2, 1924.

[10] *Ibid.,* August, 1914, p. 732.

[11] *Ibid.,* September, 1912, p. 834.

into seven groups—*Prima*, *Secunda*, *Historica*, *Biographica*, *Bibliographica*, *Incunabula* and *Manuscripts*. Sayle, of the Cambridge Library, thinks it will be feasible, but, of course in a published *Catalogue* there will have to be a very complete index."

His own favourite author was Sir Thomas Browne, who is the subject of a delightful bio-bibliographical study included in the fine volume *An Alabama Student*, etc., 1908.

I must close by calling attention to the fact that the authorized "Life" of Dr. Osler is being written by his friend, Dr. Harvey Cushing, the eminent surgeon, now at Harvard.[12]

Dr. Osler was a great bibliographer, a great physician, a very great personality. It has been well said that it was the "power of evoking the love of his fellow workers that most distinguished him."[13] That love made them better workers and better men. We who knew him can never forget our great debt to our much beloved friend.[14]

---

[12] This admirable biography (i, 685 and ii, 728 pp.) was published by the Oxford University Press in April, 1925. See the charming note by E. S. Martinin *Life*, May 7th, and the essay by Stewart P. Sherman in the *New York Herald Tribune* review, *Books*, May 31st.

[13] *London Times*, December 31, 1919, p. 13.

[14] The volumes entitled *Æquanimitas* and *An Alabama Student* have been incidentally mentioned above. *Science and Immortality*, 1904, is also very interesting. Camac's *Counsels and Ideals*, from the writings of Sir William Osler, 1905, (an enlarged edition appeared in 1921) classifies many fine excerpts from scattered sources. Cushing's edition (Houghton Mifflin, 1920) of the address as president of the Classical Association, *The Old Humanities and The New Science*, reprints also the list of specimens of the *Bibliotheca Prima* and contains a very excellent introduction, etc. Several valuable articles on him are in the *Annals of Medical History*, Vol. II, No. 2. See also *British Medical Journal*, January 3rd and 10th, 1920; Allbutt, in *Nature*, January 8th; Garrison, in *Science*, January 16th; Thayer, in *New York Nation*, January 24th, (fuller in *Bull. Med. and Chir. Faculty of Md.*, January, 1920); Streeter's "Osler as a Bibliophile (*Boston Medical and Surgical Journal*, April 1st, 1920); D. S. Freeman's admirable editorial in the *Richmond News Leader*, December 30th, 1919, quoted in large part in the *Literary Digest*, January 17th, 1920. *The Bibliography of the Writings of Sir William Osler*, by Minnie W. Blogg, "revised and enlarged with Index," from the *Johns Hop. Hosp. Bull.*, 1919, has now been issued as a separate book (Balto, 1921). Also the "Sir William Osler Memorial Number" of the *Canadian Medical Association Journal*, July, 1920, containing many articles on his childhood and early professional and later Oxford days, by N. B. Gwyn, F. J. Shepherd, A. D. Blackader, A. Malloch, J. G. Adami, and others, together with a classified Bibliography of his Canadian period by M. E. Abbott.

OSLER ON THE EVOLUTION OF MODERN MEDICINE

W. W. Chipman, M.D.

Montreal, Canada.

IN 1913 Sir William Osler delivered at Yale the Silliman Memorial Lectures, These Lectures constitute the tenth of an Annual Series, designed by the Silliman Foundation, "to illustrate the presence and providence, the wisdom and goodness of God"; and wise indeed was the Testator, for he adds, "as manifested in the natural and moral world." Delivered as we have seen, before the Great War, they did not appear in print till 1921, nearly two years after Osler's death. As all the world knows, there was abundant reason for this delay.

These Lectures were posthumously arranged for the press in book form by Fielding H. Garrison, Harvey Cushing, Edward C. Streeter, and Leonard H. Mackall. These men were one and all, great personal friends of Osler's, and the editorial work, for them a labour of love, is extremely well done. They tell us that the illustrations, which add so much to the interest of the text, have been for the greater part retained as Osler left them. The Editors conclude their preface with the following tribute to the book: "We have no hesitation in presenting these Lectures to the profession and to the reading public as one of the most characteristic productions of the best balanced, the best equipped, the most sagacious and most lovable of all modern physicians."

With this statement of theirs we are in hearty agreement.

Few men have been better qualified than Sir William Osler to write a history of the Evolution of Medicine; for he was something of the priest, much of the philosopher, and an admirably trained and experienced physician. In this way, he embodied in himself, as it were, the true sequence of the history of Medicine; and he could, in consequence, see clearly and sympathetically from the beginning.

---

1 The Evolution of Modern Medicine. A series of lectures delivered at Yale University at the Silliman Foundation in April, 1913, by Sir William Osler, Bart., F.R.S., New Haven, Yale University Press, 1921, 243 pp., 107 illustrations.

It is undoubtedly true that the story of Medicine really includes and embraces the whole history of Mankind. For the "Know thyself," the passionate behest of the famous Delphic Oracle, was in reality only the great cry of humanity become at last articulate. This knowledge of self, this understanding of ourselves, mental, moral, and physical, as we arbitrarily divide it, is related fundamentally to the study of Medicine. It is only by means of this study that we can know ourselves, and through ourselves the world outside and beyond us. This medical self-knowledge, is, in fact, the beginning and the end of all knowable things.

In the long exodus of the human race, "from out the night, the blinding night," of ignorance and superstition, we know that the first exponent, the first leader or prophet, was the priest; then followed the philosopher; and, finally, the physician. The one was the natural progenitor of the other. And the last of these, however modern, if he be a great physician, must inherit abundantly from his forbears. Osler was such a one, for he was richly endowed with this double inheritance.

And in this book there is unmistakeable evidence of this inheritance; not only in the setting of the story itself, but in the catholic selection of its component parts. It is a short history, only six chapters, an "aeroplane flight" the author calls it; and yet, while it is succinct, it is nevertheless clear and comprehensible. The story begins of course, in Egypt and Mesopotamia, with our earliest medical records; and down through the intervening ages the several threads of the narrative are kept disentangled and discrete, until they are finally interwoven into one definite whole. No simple or easy task is this, for nowhere other than in a History of Medicine is a writer more prone to miss the wood by reason of the trees. Here, however, we do not miss the wood, it is kept in fine perspective, for the narrative is a clear, simple, and balanced one from the beginning to the end.

Osler was always a student, a judicious and diligent reader of books. By reason of this learning, it has been possible for him to gather up and concentrate this diffuse, this collateral light, and to focus it as it were, upon his theme. In this way the story is made more luminous and distinct, even while it is seen with a wider horizon round about it The "impassioned philosophy" of the poet he has frequently invoked, and the nar-

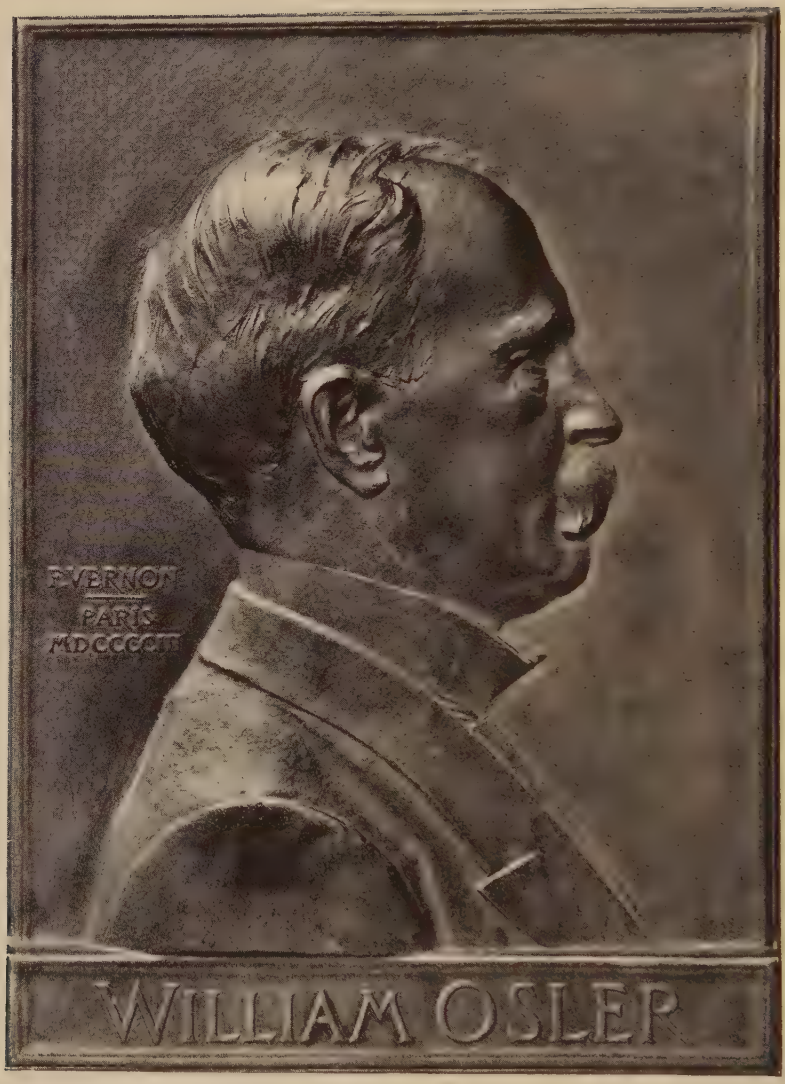
rative is quickened or stirred thereby, both in its sense and feeling.

The dominant note in the harmony of Osler's character, was his great love of humanity, his abiding interest in, and sympathy with, his fellow-men. This was manifest, not only in his life, but in everything he ever said or wrote. Dr. Maude E. Abbott describes this attitude in other words when she speaks of his "invincible optimism, his belief in the inherent greatness of man." Osler always wrote in the light of this human love, and in this medical history his humanity constantly imbues and permeates the "humanities" of the text. We are told again of the Fathers of Medicine, and of what they achieved; and then by a few deft and sympathetic strokes, these men are made to live before us; each one of them we see as a man, like unto ourselves, living and moving in his own time. The *animus* of Osler animates them all.

One of the best sections of the book deals with the rise of the Universities of the thirteenth century, the Universities of Bologna, Padua, and Montpelier. Osler was himself a great teacher, and there is evinced here a genuine affection for the old Schoolmen, and these old Schools. The concluding paragraph is eminently characteristic: "What would have been its fate if the mind of Europe had been ready for Roger Bacon's ferment.. instead of wasting centuries....like the members of Swift's famous College, 'busy distilling sunshine from cucumbers'?"

Most appropriately, the final chapter of this history deals with the Rise of Preventive Medicine. In a few admirable pages we are shown that Sanitation rightly takes its place among the great modern revolutions; and its wonderful achievement as against the ravages of malaria, yellow fever, and tuberculosis is recorded. Again, it is no idle boast that, in Preventive Medicine, there shall be fulfilled the famous prophecy of Descartes, that "We could be freed from an infinity of evils....if we had sufficient knowledge of their causes, and of all the remedies with which nature has provided us."

Osler was an optimist throughout his life. The "Evolution of Modern Medicine," is among the last things that he has left us. It is fitting that it should end as it does in the profession of an abiding faith in human effort and human achievement. His testimony is that of the famous Greek Philosopher, "That which benefits human life is God."



SIR WILLIAM OSLER

from the bronze plaque modeled from life, by

MONSIEUR F. VERNON

CAST IN PARIS BY BARBEDIENNE

IN 1903

BIBLIOGRAPHICAL

University of Toronto
(1867-1869)

McGill University
(1870-1884)

Oxford University
(1905-1919)

University of Pennsylvania
(1885-1889)

Johns Hopkins University
(1890-1904)

Coats of Arms, or Seals, of the five Universities which were the scene of Osler's academic activities. *(Published by permission.)*

BIOGRAPHICAL

EARLY DAYS

THE EARLY LIFE OF SIR WILLIAM OSLER*

NORMAN GWYN, M.B.

Toronto

FELLOW-DISCIPLES, Members of the society—Though coming to you with a pass-word—a familiarity with the conditions under which Sir William spent his early days—I yet feel that I am invading sacred confines, for to the earnest student of medicine the school that graduated Osler must forever be a holy ground. Reverence and deference I therefore bring, but only so much I hope, as will not overcast the clear outlining of a very human character, the character of one who, in his youth, was very much like most normal men, save in the possession of an unusual charm, and of an initiative and foresight uncommonly developed.

The Osler who left McGill so well prepared for his life's work that he quickly pressed far forward in American medicine, came to you, we shall insist, a formed character; in his own wisdom he chose McGill, but already the compelling forces of inheritance, training and environment had put forth from him the substance of those enthusiastic studies in natural history and biology which your library possesses. Born, bred, taught, in Ontario parishes, Upper Canada claims Osler as perhaps the most perfect flower of her cultivation.

Circumstances have allowed me easy access to the facts of the Osler inheritances and to the fascinating details of Sir William's early life. I shall try to put them before you, not as dated and labelled descriptions, but more as a continued story.

Not often does it happen that a great character goes through his life uninfluenced by heredity or environment. Osler, born into a family stamped strongly with hereditary traits and characteristics, grew up under conditions which seemed to take him easily

*An address delivered before the Medico-Chirurgical Society of Montreal, in November, 1920.

and naturally forward to the threshold of a world waiting for his step. His inheritances were clear-marked and striking; the influences of environment follow one another in orderly fashion, each seeming to leave with him something for the emergencies of the future, while, as concerns his training, one is tempted to say, that no child was ever better instructed in the elements of life—"duty, obedience, and industry"—and that the chance which placed a boy with Osler's natural gifts and qualities under the influence of Johnson, Bovell,* and a group of natural scientists, was a coincidence directed by a very special fate.

For this rather personal analysis of Sir William's early life, I have taken for consideration four points:

Details of inheritance and training.
The man and the opportunity.
Adolescence and its surroundings.
An idea and its cultivation.

I hope that you will agree with me in feeling that in the simple statements I am about to make are contained many circumstances which throw light on this wonderful life.

I. INHERITANCE AND TRAINING

Why, in a family whose bent was business, the clerical and scholastic side should suddenly appear and develop, is difficult to say.† (Appendix I). Striking results of such deviations are, however, often seen, and when, successively, three sons of a merchant turn to the church or medicine, it is probable that the subsequent progress of that family will be upon entirely different lines to heretofore. The ancestor second in line to Sir William (his grandfather, Edward Osler), shows in his clearly worded correspondence that education had been a well considered detail of his life, but there flashes nowhere in the orderly pages of his letters any glimmer of the spark that glows, perhaps faintly, in the writings of a son‡ and that burns now so brightly in the grandson's *Æquanimi-*

* Osler's teachers at Weston and Toronto, two of the three names in the dedication of his text-book.

† Samuel Drew, the Cornish metaphysician, *whose aunt* married an Osler progenitor, ascribes all his virtues to his mother; a family tradition had it that perhaps the Osler literary bent was a Drew inheritance. See the Life of Samuel Drew. See also Cushing's Life of Osler.

‡ Edward Osler, Jr., Sir William's uncle.

tas. He details well, nevertheless, business, the business of a shipping merchant, venturing cargoes and ships, sending to and receiving from Atlantic and Pacific shores, choosing men trustworthy and enterprising; the business of sea-faring England.

Nearly fifty years of Cornish shipping precede this Edward Osler, fifty years of owning, building and sailing those ships which were making English the trade of the world, fifty years of meeting the elements in all their changing moods; the habit of thinking and acting, the unusual faculty of seeing in a moment a passage through the rugged reefs of life (the Osler characteristic), came as a direct inheritance to Sir William and his father, both of whom were, above all, pioneers in their respective callings.

The revolution which took place in the family at this time and the break with commerce was overwhelming and complete, as concerns three at least of five sons. Featherstone, (Sir William's father), enrolled in the Royal Navy; Edward, the elder son, entered medicine, (his "indenture" was always a familiar sight in Sir William's consulting room at Oxford); Henry, later in line, followed his older brother Featherstone to the Canadian mission fields after a very complete reconstruction in that sailor's life.

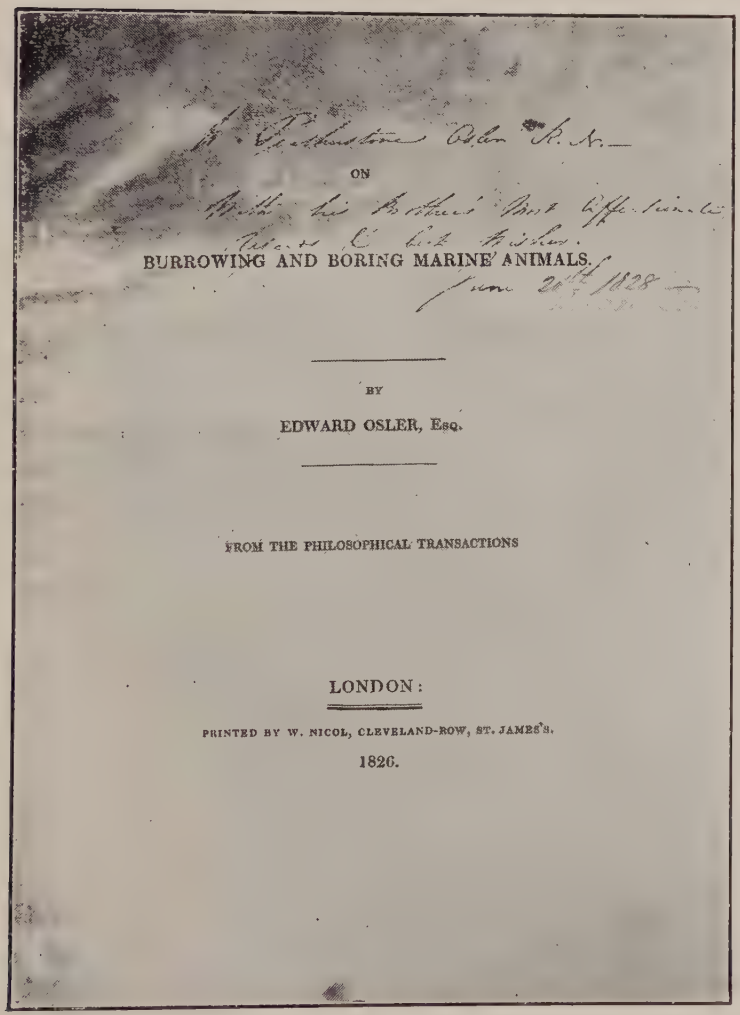
Development along unusual lines took place at once. The uncle Edward demonstrated that a real scientific and literary bent had been acquired or inherited,* as seen in his publications: *Observations on the Anatomy of the marine mollusca, Burrowing and boring marine animals,* (Fig. 1), *Life of Lord Exmouth,* (Fig. 2), *Church and King,* (Fig. 3), and in his twenty years editorship of the *Cornwall Gazette.* His book, *Church and King,* and several hymns in the Anglican hymnal show the bias of his mind; he is the first of those religious naturalist influences or associations which we will see so prominent in Sir William's early life, and one is easily persuaded that in Edward Osler is appearing that keen scientific spirit of enquiry so finely developed in the next generation in the person of his nephew William; a glance at the reproductions (Figures, 4, 5, and 6) show that a remarkable quality of technical skill was added to his

*Edward Osler's scientific bent was actively encouraged by the Quaker naturalist Dillwyn who pursued many studies along the southern English shores; Edward Osler acknowledges his indebtedness to Mr. Dillwyn in one of the scientific publications, and the paper upon the "Anatomy of the marine mollusca" was communicated to the Royal Society for Edward Osler by Mr. Dillwyn.

powers of observation and that the delineations are delicate to a degree; to the well known old naturalist, L. W. Dillwyn, F.R.S., much of the inspiration which produced these publications and plates is due, and the interesting fact is already before us that Osler would be familiar from his earliest days with scientific transactions that had the added attraction of family interest; whether he would note the important detail that Mr. Dillwyn's student had been urged on to publication in his early years, is a matter for conjecture. (Appendix II).

In the direct line, in Sir William's father, the Rev. Featherstone Osler, is seen at once the appearance of that quality so evident in Sir William's career,—the ability to blaze fearlessly a new trail. Thirteen years in the Royal Navy had been quite insufficient to dampen independent thought and action; at twenty-five the great call was heard and serious preparation for the Church was begun at Cambridge. Serious surely at that age must be considered the giving of nearly seven years to the getting of an M.A. degree, and the reaching of a deacon's status. No extraordinary scientific or literary attainments are ascribed to Featherstone Osler, but the two striking qualities of initiative and endurance, qualities more in keeping with the part he was to play, are to be seen in every turn of his active life. These qualities, essentially those of the adventurer, took him far afield. Ordained deacon by the Bishop of London, he was anticipating marriage and a comfortable existence in an English parish when the appeal of the foreign missions was brought directly home to him. Back of the missionary spirit, whose ears turned readily to the call, was possibly the sailor's will to far-adventure. The woman he was about to marry made easier the eventful decision, and in 1837, this, the most practical representative of the family, landed in Canada to take a prominent part in the missionary work of the upper province. (Appendix III, IV).

Twenty years of pioneer work ensued; twenty years of far riding and constructive activities in the enormous area of his mission field, (Fig. 7); twenty years in which the growth and education of a large family was watched with an unusual degree of care. Important to a degree and far-reaching in its results is the fact that teaching was an atmosphere of the household; six of the assistants in the mission received their theology and instruction at the rough-built parsonage and were later ordained by Bishop



ON

BURROWING AND BORING MARINE ANIMALS.

BY

EDWARD OSLER, Esq.

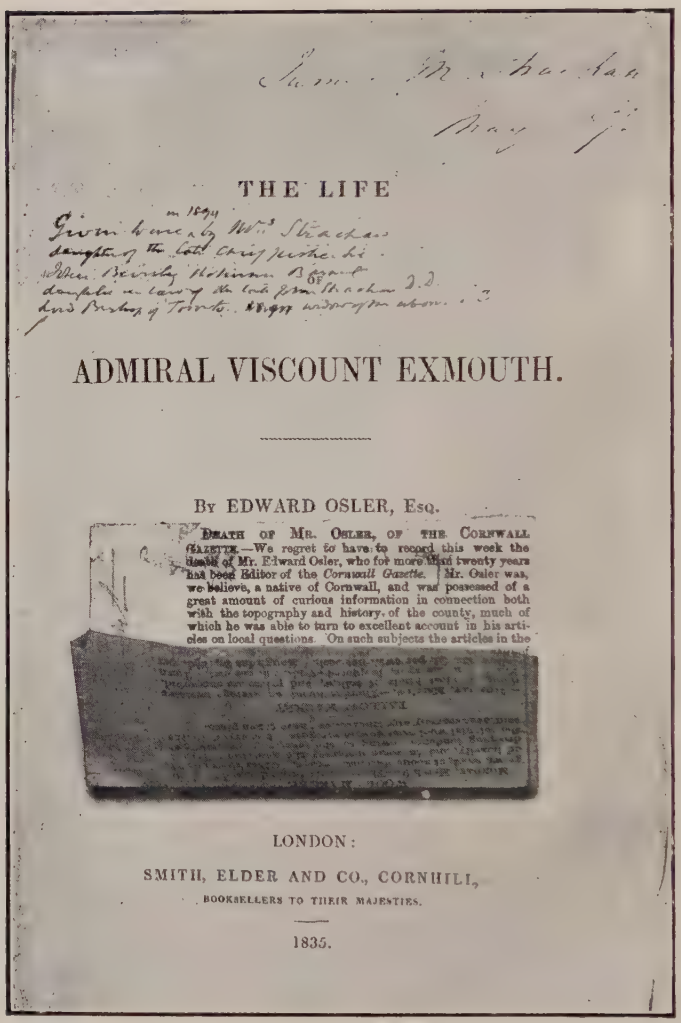
FROM THE PHILOSOPHICAL TRANSACTIONS

LONDON:

PRINTED BY W. NICOL, CLEVELAND-ROW, ST. JAMES'S.

1826.

FIG. 1.—Title page of "Burrowing and Boring Marine Animals," by Edward Osler



THE LIFE

ADMIRAL VISCOUNT EXMOUTH.

By EDWARD OSLER, Esq.

DEATH OF MR. OSLER, OF THE CORNWALL GAZETTE.—We regret to have to record this week the death of Mr. Edward Osler, who for more than twenty years has been Editor of the *Cornwall Gazette*. Mr. Osler was, we believe, a native of Cornwall, and was possessed of a great amount of curious information in connection both with the topography and history of the county, much of which he was able to turn to excellent account in his articles on local questions. On such subjects the articles in the

LONDON:

SMITH, ELDER AND CO., CORNHILL,

BOOKSELLERS TO THEIR MAJESTIES.

1835.

FIG. 2.—Title page of "The life of Admiral Viscount Exmouth," by Edward Osler.

CHURCH AND KING.

COMPRISING

I.

THE CHURCH AND DISSENT,

CONSIDERED IN THEIR PRACTICAL INFLUENCE, SHEWING THE CONNEXION OF CONSTITUTIONAL MONARCHY WITH THE CHURCH; AND THE IDENTITY OF THE VOLUNTARY PRINCIPLE WITH DEMOCRACY.

II.

THE CHURCH ESTABLISHED ON THE BIBLE;

OR, THE DOCTRINES AND DISCIPLINE OF THE CHURCH SHEWN IN THE ORDER AND CONNEXION OF THE YEARLY SERVICES APPOINTED FROM THE SCRIPTURES.

III.

THE CATECHISM, EXPLAINED AND ILLUSTRATED,

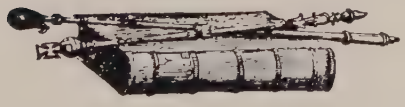
IN CONNEXION WITH THESE APPOINTED SERVICES.

IV.

PSALMS AND HYMNS ON THE SERVICES AND RITES OF THE CHURCH.

BY EDWARD OSLER,

FORMERLY ONE OF THE SURGEONS TO THE SWANSEA INFIRMARY.



LONDON:

PUBLISHED BY SMITH, ELDER AND CO., CORNHILL.

1837.

FIG. 3.—Title page of "Church and King."

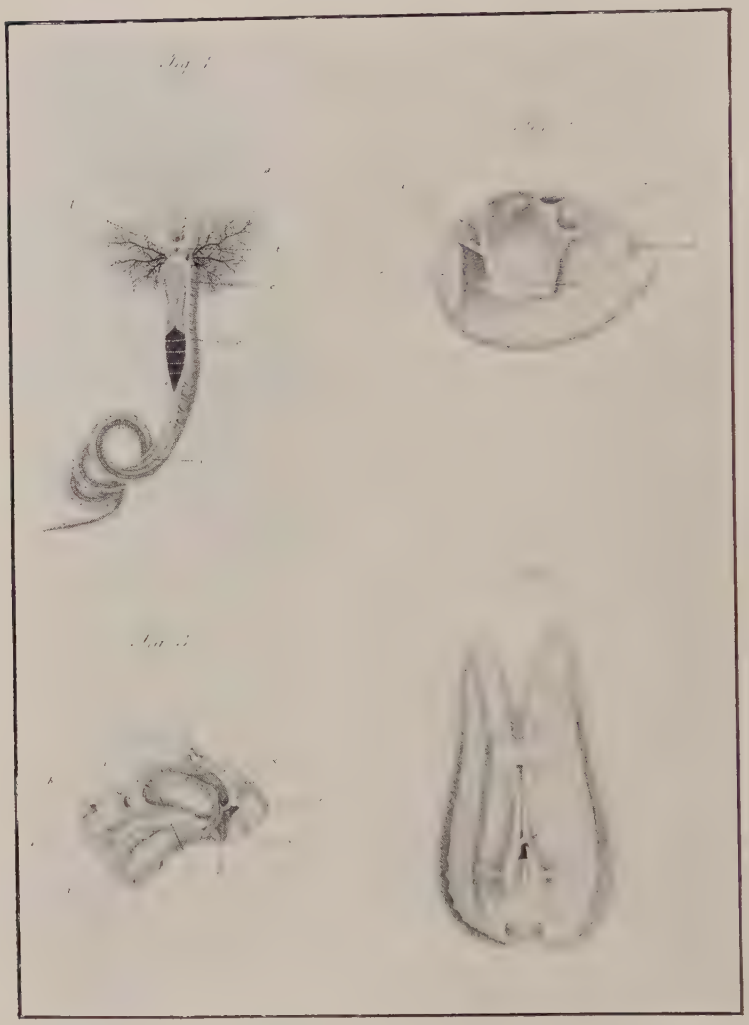


FIG. 4.—Reproduction from Edward Osler's "Burrowing and Boring Marine Animals." Philosophical Transactions, 1826, 116, Part II, Plate xiv.

From the author's own drawings and inscribed E. Osler. Fec.

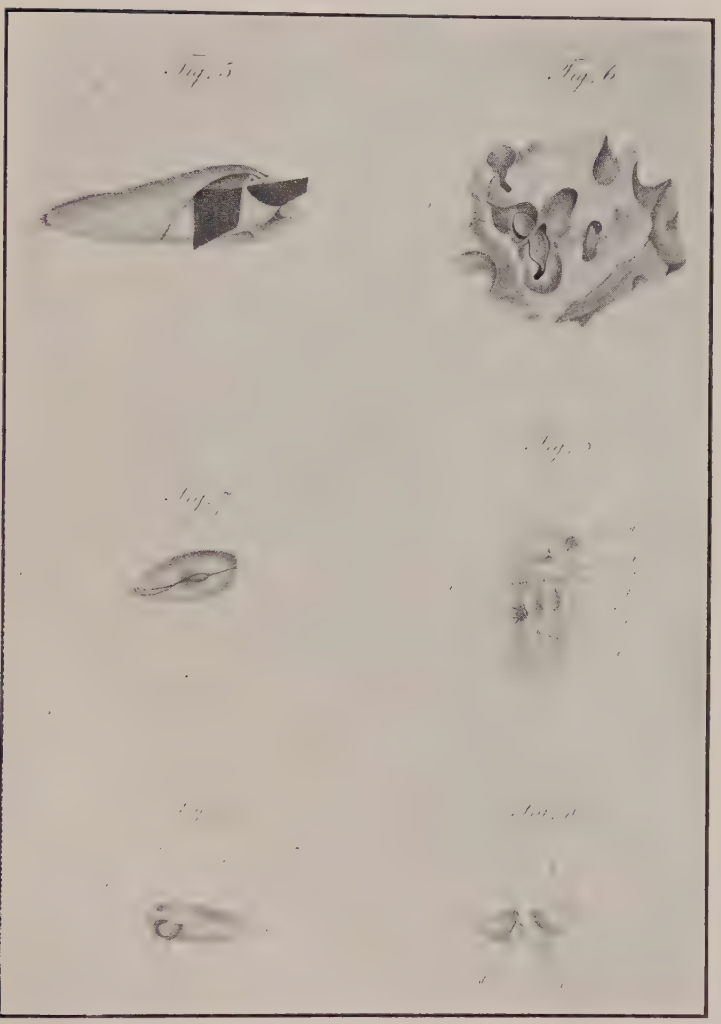


Fig. 5.—Reproduction from Edward Osler's "Burrowing and Boring Marine Animals." Philosophical Transactions 1826, Plate II, plate xv.

From the author's own drawings and inscribed E. Osler. Fec.

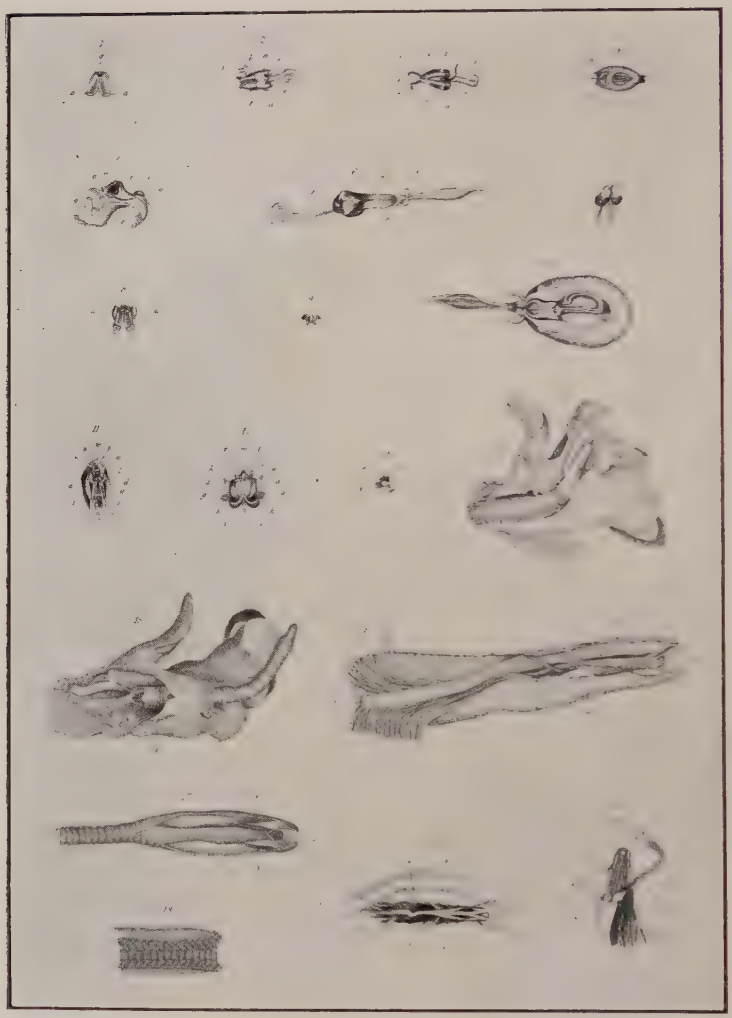


FIG 6.—"Reproduction from Observations on the Anatomy and Habits of Marine Testaceous Mollusca, illustrative of their mode of feeding. By Edward Osler, Esq. Communicated by L. W. Dillwyn, Esq., F.R.S., June 21, 1832. Philosophical Transactions 1832, vol. 122, Part I, plate xiv, p. 498."

From the author's own drawing and inscribed E. Osler. Fec.

FIG. 7.—The district north of Toronto to which Sir William's father first came. The route of Yonge Street, a military road, is only roughly sketched. Dundas is not shown in the map, it lies 45 miles south-west of Toronto directly off the end of Lake Ontario. Featherstone Osler's charge extended south to Aurora which lay half way between Bond Head and Toronto, northward it reached the Georgian Bay shores which are shown in the map, while westward it stretched over to the shores of Lake Huron. This mission field covered roughly 1,000 square miles. The present road from Toronto to Holland Landing was planned through by Sir George Yonge, who was secretary of war in 1791, in order to help make communication through to Georgian Bay and Lake Huron by way of Lake Simcoe. At the top of Lake Simcoe, trails went westward toward a district marked with a circle where lies a small stream, Coldwater, and Bass Lake with its outlet North River, both running to Georgian Bay. In some of the old maps this stretch of trail, five miles in length, from Lake Couchiching (the head of Lake Simcoe) to Bass Lake is called Yonge Street. When the Reverend F. L. Osler came to these districts the colonization roads were in existence though extremely rough, the old trail from Barrie to the Nottawasaga River was in use till the railways came through in 1853.

1. Portage from Humber to Holland River.
2. Portage from Lake Simcoe to Nottawasaga River.
3. Penetang on Georgian Bay.
4. Bass Lake, North River, Coldwater Area.
5. Weston, 12 miles west of Toronto.

FIG 8.—The parsonage at Bondhead. From a drawing by a playmate of the elder children, (the property of the late Justice Featherstone Osler).

Strachan.* One must realize that the little country parsonage was a well developed school of Anglican theology. (Fig. 8).

The family was well established and the early hardships over when Sir William, the ninth and youngest child, was born at the Bond Head parsonage, on July the twelfth, 1849, (Fig. 9), "in the best of all environments" as he was wont to call it. Here were spent the first eight years of his life under conditions ideal for the development of a young body and character, conditions framed by two far-seeing parents alive to the future's needs, and strong set in a foundation of good example. Knowing the family characteristics one can and in fact must surmise the early training, for this period of Sir William's life passes without written record; one recognizes that the busy existence of the parents and their essentially limited means precluded a diary of a child's life or the taking of innumerable photographs; in these early days of the family development the acquiring of habits of cheerfulness, obedience and trustworthiness was considered the vital part of training and education.

One phase of this Bond Head existence must be touched upon,—a phase of more than usual interest as concerns the evolution of two of the best marked qualities of Sir William's character, —his tolerance and breadth of mind. Born in an Orange community on July twelfth, he was held up to view as the "little Prince of Orange" in the arms of a sternly Protestant father to the processions of local Orange societies; a line of an acrostic written by the local doctor reflects the tone of the district (Fig. 11); even later in Dundas he breathed an atmosphere strongly anti-papal. To have preserved through these young years a mind unbiased, untouched by the bitterness of the religious discussions about him, can only be considered as unusual to a degree. The ultra-ritualistic teachings of Johnson, heard and received later, found in Osler but little soil for their permanent growth. To a nature such as his, the kindly breadth and tolerance of the Religio Medici, in his hands from the early Weston days, would come as a message direct.

---

* From the minutes of the council of Trinity University March 4th, 1854. "Resolved that the Rev'd. George S. Hill, rector of Markham and the Rev'd. W. S. Darling, assistant at Holy Trinity, Toronto, having with the approval of the Bishop of Toronto, commenced their studies for holy orders under the Rev'd. F. L. Osler, M.A., before the establishment of the Theological College at Cobourg be allowed to graduate in arts at Trinity College under the regulations provided."

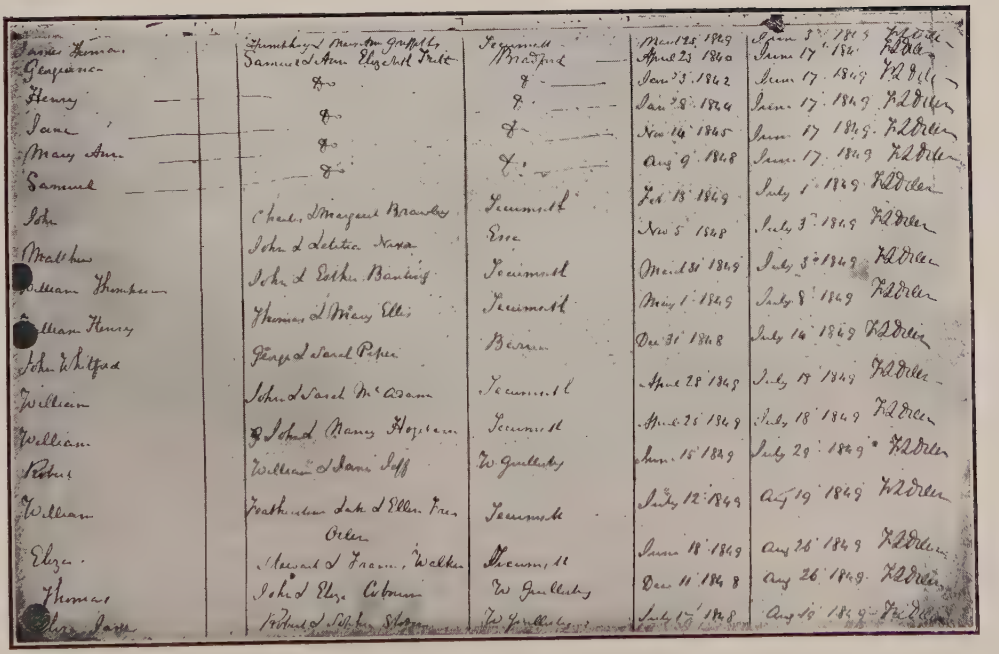
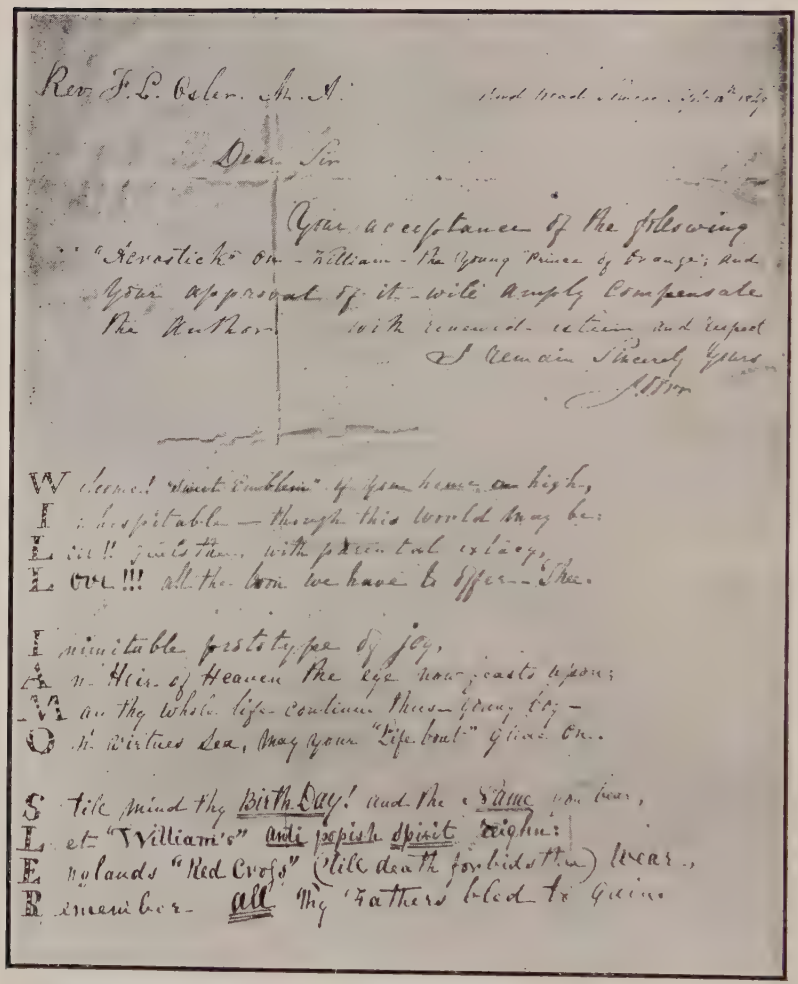


FIG. 9. Certificate of Sir William's baptism. Note the handwriting and the signature, "Osler." Note also, six lines above "Osler," the name of Banting—father of Banting of insulin fame—an unusual acquirement for one page of any parish register.

FIG. 10.—A family group showing Sir William Osler as a child of seven. He stands at the extreme left. Next to him are three of his brothers, F. Osler, of London, England, the late Sir Edmund Osler, the late Edward Osler, Nellie (the late Mrs. Williamson), Charlotte (the late Mrs. H. C. Gwyn). The five figures to the right are the family of their neighbours, the Gavillers.



Rev. F. L. Osler. M. A.

Dear Sir

Your acceptance of the following "Acrostick" on William the Young Prince of Orange; and your approval of it will amply compensate the Author with renewed esteem and respect

I remain Sincerely Yours

J. Orr

W elcome! "Sweet Emblem" of your home on high,
I hospitable — though this world may be:
L ill!! guels thee, with parental extacy,
L ove!!! all the boon we have to offer — Thee.

I nimitable prototype of joy,
A n Heir of Heaven the eye now feasts upon;
M ay thy whole life continue thus young boy —
O n Virtues sea, may your "Life boat" glide on.

S tile mind thy Birth Day! and the Name you bear,
L et "William's" anti popish spirit reign:
E nglands "Red Cross" (till death forbids thee) wear,
R emember all thy Fathers bled to gain.

FIG. 11.—An acrostic by J. Orlando Orr, M.D., who was present at the birth of Sir William.

As of minor and more purely sentimental interest may be exhibited the homelike group photograph, taken with brothers, sisters and playmates, the only picture we possess of Sir William as a child. (Fig. 10).

The twenty years of achievement in the mission field had their reward, and in 1857, in Sir William's ninth year, his father moved to Dundas, into the charge of the three flourishing parishes of Dundas, Ancaster and Flamborough. As a result of this move the boys of the family came under the eyes and hands of King and McKee, heads of the justly celebrated grammar school in Dundas. Early teachings continued and amplified, prepared here a rich classical soil in which the later instructions by Checkley* at Barrie and by Johnson at Weston must have the easier taken root; from this time on one can speak with more certainty of Sir William's early days and development, a settled social existence superseded the rougher Bond Head life; the rectory in Dundas became the typical quiet English home, "a gardener's pride" in its surroundings and productivity.

Seven singularly happy years were spent by Sir William as a child in Dundas, and later at school in Barrie, years (with reservations†) of steady application to school and home duties, years of hearty boyish activities still remembered by a surviving few, years marked not so much by the accumulation of rewards for proficiency, as by the acquiring of numerous friendships and interests, which came readily to his straightforward and sunny nature. In this connection it must be said that though the personal recollections of this period are plentiful, written records do not exist in any great number, for, living at home, there was no occasion for a

*Checkley was an intimate of Johnson, the inspiring leader, whom Osler was soon to meet; the frequent references in Sir William's early writings to the minute animal life in the waters near Barrie make one entertain the thought that the first steps in natural history may have been taken at the time of Osler's second school period at Barrie, Ontario.

†One reservation was the expulsion from the school at Dundas, resulting in the transfer to the Checkley school at Barrie. The real underlying cause was probably the old story of the Established church versus dissent.

(a) Extract from the *Dundas True Banner*, June 9th, 1864:
"That against your son was that he, when passing to the school, put his mouth to the keyhole of the door and called out contemptuously, "Come out, old McKee," with other disparaging terms.

(b) Extract from letter from Featherstone Osler, June 2nd:
"As to sending my son back to school, I would never disgrace a child of mine so much as to place him under the jurisdiction of men capable of acting as the majority of the Dundas Board of Trustees have done." (Signed) Featherstone Osler.

correspondence. No evidence is at hand of any prodigious performances which might have indicated the part he was to play in the world's work. "A light-hearted boy, but with many of the tastes and much of the dependableness of a man", is the description given of the Osler of that time by an English relative who was spending some months in the now well-established household at Dundas.*

It was then with these inheritances thus briefly sketched, with a sterling training and with a thorough classical schooling, that the lad William Osler, well endowed with qualities of unusual attractiveness, put foot on the great high-way; waiting to receive him was the compelling influence of his life, "Johnson, priest of the parish of Weston."

II. THE MAN AND THE OPPORTUNITY

In "A Way of Life"† Sir William Osler refers to Samuel Johnson's remark upon the trifling circumstances by which men's lives are influenced; he himself was diverted, he says, to the Trinity College School at Weston, and his whole life changed, by a paragraph in a circular stating that "the senior boys would go into the drawing-room in the evenings to learn to sing and dance."‡ Familiar and humorous as this sounds to those of us who knew his methods, it is probably true, for letters from his mother at this time speak of the music lessons and their cost. (Appendix V). By this incident, incredible as it may seem, the student met the master, the man and the opportunity came together.

The opportunity was his coming at this time under the influence of Johnson, (Fig. 12a), "a man of the 'White of Selbourne' type, who knew Nature and who knew how to get the boys interested in her"; self-taught since his school days, a soldier-immigrant with his father to the rough Lake Erie shores where began the attainment to his ideals (a life and work in the church), Johnson was a scholar and naturalist of a type unknown in that part of the world; his life, his work, his portrait, indicate the source of many of the Osler habits of mind; he became at once the great influence of Sir William's early life, and from him were acquired the beginnings of that familiarity with the master-minds of earlier times, so

*Statement of Miss Jeanette Osler, cousin of Sir William and living in the house at Dundas at this time.

† An address to the Yale students, April 20, 1913.

‡ A. J. Johnson speaks of this circular in an account of the School written for the Trinity College School Record, Jubilee Number, 1915.

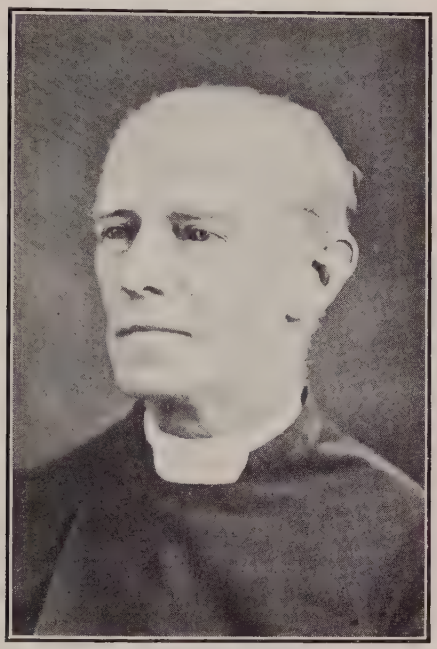


FIG. 12a.—Rev. W. A. Johnson, "Priest of the Parish of Weston."

22/1/67. 505 Crocodile scale ground by Osler, ground through, (dry)
506 ~~Transverse &~~ longitudinal sections of bone of a cat, brought from the Pyramids of Gizeh (dry) supposed to be 4000 years old the bone was given me by Dr. Bovell

22/iv/68 864 Encyonema prostratum, in Gly,
" " given me by W. Osler,

FIG. 12b.—Photograph of pages of Johnson's catalogue showing entries of specimens from Bovell, and from Osler while yet a student (act. 18): The specimens and cabinet are now in the Academy of Medicine, Toronto.

apparent in the writings and conversation of the Osler of later days, as well as a remarkable acquaintance with natural history and its fascinating microscopical side. (Fig. 12b).

Earlier in this sketch is made the statement "that the chance which placed a boy with Osler's natural gifts and qualities under the influences of Johnson, Bovell and a group of natural scientists was a coincidence directed by a very special fate." Few coincidences have had more lasting and striking results; Johnson, when we first hear of him a boy of eighteen, schooled at Twickenham, and holding a commission in a cavalry regiment, was that unusual and attractive combination of a soldier and a student; somewhere in the school and army life a love of natural history had been acquired and developed, and amongst his personal effects when landing from a sail boat on the uncleared north Lake Erie shore in 1832, was a microscope, well-used. To an iron will and perseverance, such a handicap as the lack of a university training made but little difference, and the education at the hands of an artistic and practical father* (an intimate of the great Turner) probably made good many deficiencies, so that in his later years Johnson is found an earnest student of the natural sciences, a man well grounded in the classics, and a priest of the Anglican church. To his efforts was due the founding of the school at Weston, now Trinity College School, Port Hope, a school which was to prepare the student for the faculty of divinity at Trinity University, and in his person we see one of those remarkable teachers with the capacity for a personal intimacy with their students and with the ability to enthuse and inspire the younger mind. From the moment that Osler crossed the Johnson threshold his kingship was assured; one of the most receptive young minds of the day, and one destined to be perhaps the most advanced, had been placed under the influence and care of a king-maker of the highest and noblest type.

Entering Johnson's school at Weston (Fig. 13), in January, 1866, Sir William spent nearly two years in what must have been

---

*The elder Johnson, who came to Canada in 1832 with his son, W. A. Johnson, Osler's teacher, had been a Colonel of the Engineers and aide-de-camp to the Duke of Wellington. In their belongings brought with them to Canada was everything that might be needed in a new country. Builder and architect, he was a wood-worker as well, and in his houses, built eighty years ago, much of the wood work was his own and still exists. W. A. Johnson was no less apt; a visit to St. John's Church at Weston and an inspection of his efforts in wood-turning is a revelation, every bench in the church is his handiwork.

FIG. 13.—THE SCHOOL AT WESTON WITH THE CHAPEL AS ORIGINALLY PLANNED AND BUILT BY JOHNSON. From an old blue-print in the possession of the late Jukes Johnson.

Trinity College School, Weston.

VISITORS.

THE HON. AND RIGHT REV. THE LORD BISHOP OF TORONTO.
THE RIGHT REV. THE LORD BISHOP OF ONTARIO.

GOVERNING BODY.

Ex-officio Members.

THE HON. J. H. CAMERON, Q.C., D.C.L., *Chancellor of the University.*
THE REV. THE PROVOST OF TRINITY COLLEGE.
THE REV. JOHN AMBERY, M.A., *Professor of Classics*
THE REV. WILLIAM JONES, M.A., *Professor of Mathematics.*
JAMES BOVELL, M.D., *Professor of Natural Theology*
THE REV. C. H. BADGLEY, B.A., *Head Master of the School.*

Elected Members.

THE REV. W. A. JOHNSON.
THE VEN. A. N. BETHUNE, D.D., D.C.L., *Archdeacon of Toronto.*
THE REV. T. B. FULLER, D.D., D.C.L.
THE REV. J. G. GEDDES, M.A.
THE HON. G. W. ALLAN, M.L.C.
C. J. CAMPBELL, ESQ.

THE MASTERS

Head Master

THE REV.-C. H. BADGLEY, B.A., Queen's College, Oxford

Assistant Masters.

L. H. EVANS, ESQ., B.A., Trinity College, Toronto, (*Mathematics*)
REV. W. A. JOHNSON (*French and Drawing*).
MR. SEFTON (*Singing*)
CAPTAIN GOODWIN (*Fencing and Drill*)

COURSE OF INSTRUCTION

The Course of Instruction includes all the usual branches of a sound education in Classics, Mathematics, English, French, Drawing, Vocal Music, and Drill.

SCHOOL LISTS.

FROM MAY 1, 1866, TO MAY 1, 1867

	Entered.
Johnson, Arthur Jukes (*Prefect*),	May 1, 1865
Johnson, James Bovell,	" " "
Johnson, Andrew William,	" " "
Price, Arthur Hamilton Harvey,	" " "
Whitney, Forbes,	" " "
Jukes, Arthur Elias,	Sept. 9, "
Helliwell, Frederick John (*Prefect*),	" " "
Helliwell, Robert Anderson,	" " "
Greey, John,	" " "
Fraser, John Williams.	" 20, "
Darling, Frank,	Oct. 18, "
Merritt, William Hamilton,	" 23, "
McCuaig, Augustus,	" " "
Holland, Arthur,	" 27, "
Jones, Louis Kossuth,	" 30, "
Perry, Peter,	Jan. 10, 1866
Boulton, Henry Rudyerd,	" 17, "
Fraser, Frederick,	" 18, "
Webb, Vere,	" " "
Osler, William (*Prefect*),	" " "
Wilson, Robert.	Feb. 17, "
Anderson, Roderick McKenzie,	April 20, "
Anderson, William,	" " "
Anderson, Robert,	" " "
Vankoughnet, Matthew Scott,	" 21, "
Campbell, Henry James,	" " "
Groves, Thomas Dent,	" 25, "
Egleston, John Phineas,	" " "
Read, Thomas William,	" " "
Read, William McKay,	" " "
Greenham, Robert Carr,	June 7, "
Greenham, Wilfred Henry,	" " "

Divinity	(Upper School)	—Wilson
"	(Extra Prize)	—Osler.*
"	(Lower School)	—Campbell.
Geometry		Osler
Greek Grammar	(Upper School)	—Fraser, [illegible]
"	(Lower School)	—Fraser, [illegible]
Latin Grammar		Campbell.
Latin Composition		Wilson.
French		[illegible]
French	(Upper School)	Trinity College
"	(Middle School)	Trinity College
"	(Lower School)	Trinity College
Reading	(Upper School)	F. W. [illegible], Esq.
"	(Lower School)	F. W. [illegible], Esq.

A prize is offered by the Rev. Professor Ambery for the best collection Geological, Botanical or Entomological, made by any boy during the course of the School year.

The Chancellor's Prize will be awarded to the Head Boy of the School, according to the result of the Midsummer Examination.

Professor of Classics.

FIG. 14.—School details

FIG. 15.—Osler as prefect at Weston.

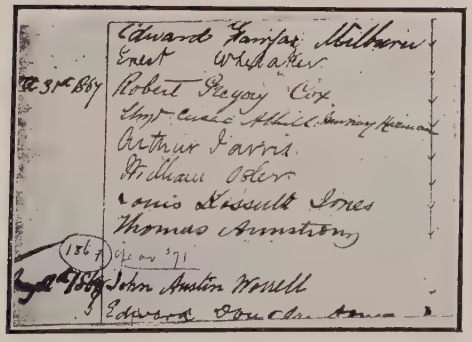


FIG. 16.—Entry at Trinity. From the register.

most exceptional surroundings, for an oasis in which "the old humanities flourished with the new sciences," where the presiding genius was Johnson, and where had settled the softened atmosphere of an English public school, was not to be expected in the desert of the upper province of those days. (Figs. 14, 15). Closely in touch with the school, its boys and its masters, enthusiastic co-worker with Johnson in natural sciences, was another oncoming influence, James Bovell. Remote from the larger centres of educational thought and action, Sir William as a child was thus nevertheless under the direct guidance of two of the most inspired men of his time, and as one result of this is seen the quiet development of his interest in the natural sciences and in zoology, an interest, some details of which can be seen in his early contributions to natural history,* in his many references to veterinary medicine, and in the many specimens we find in the Johnson collections now in the Academy of Medicine in Toronto.†

---

* *Canadian Diatomaceæ*, by William Osler, of the Toronto School of Medicine. *Canadian Naturalist*, 1870.

† From *Canadian Fresh-Water Polyzoa*, by William Osler, *Canadian Naturalist*, 1883, p. 401-402.

....."My attention was early directed to this form as it exists in extraordinary profusion in the Desjardin canal, which leads from Burlington Bay to my native town Dundas. The wooden sides of the canal basin in the months of July and August are almost uniformly covered with this magnificent species. The growth begins about one and one-half to two feet below the surface and extends in depth for the same distance or even further, rarely, however deeper than six feet.

.....In the summer of 1867, during a visit of my friend, the Rev. W. A. Johnson, of Weston, I showed him the masses, and we agreed to subject them to examination with the microscope, not having any idea as to their real nature. Judge of our delight when we found the whole surface of the jelly was composed of a collection of tiny animals of surpassing beauty, each of which thrust out to our view in the zoophyte trough a crescent-shaped crown of tentacles. Recognizing it as a polyp we were greatly exercised as to its position, presenting as it did in the method of growth, such variation from the ordinary species described in our zoological text books. Happily in the American Naturalist for that year we met with Mr. Alpheus Hyatt's paper on the Fresh-Water Polyzoa, then in course of publication, and obtained full information therefrom. On examining the surface of a mass of Pectinatella the polyps are seen to be arranged, as seen in the spirit preparation, in close areolae, which being crowded and compressed together, often assume hexagonal outlines..... In the still quiet water in the marsh on either side of Desjardin canal, just before it passes through the Burlington Heights, I have met with masses which would not go into a pail. The largest I have ever seen lay at the bottom in about nine feet of water. I could hardly believe it was a mass of polyps, but, to satisfy my curiosity, I stripped and went in for it. With the greatest difficulty I brought it up in my arms, but could not get it out of the water for the weight, which must have been close upon twenty-five lbs. It resembled in form one of these beautiful masses known as brain coral."....

The exceptional opportunity must have developed the exceptional man along all lines, for the reminiscences of his companions deal with many different qualities, "companionable, affectionate, in touch with all the surrounding interests, fearless in a remarkable degree, up to any prank,* (appendix VI), good, though not brilliant, at sports and studies," are amongst his many attributes; prefect and head boy in the growing school, he was considered an influence always for good, and his continued presence in the school is said to have been asked for.† Noteworthy is the fact, however, that nowhere amongst the details of this wonderful part of the Osler life is heard a whisper of his ideals or ideas; then, as in his later life, he was well content to be judged by performance rather than words.

III. ADOLESCENCE

Away from the home in Dundas and at school, it is to be expected that correspondence would begin at this period; few, if any, of his own letters of these days are available for reference. Reticent as to his own thoughts and ideas, little was ever expressed in his letters apart from the cheery, regular detail of the day's work, (the keeping of the ninth child's school-boy epistles might well be excused a busy mother); the boy at Weston, however, had realized early that instructions from the home in Dundas in the handwriting of a little, positive, woman were not only valuable possessions and to be preserved, but would stand for rules of guidance for all time; his early training, largely a matter of conjecture till now, is shown in its application by these letters of his mother (Appendix, V, VI, VII, VIII); quite apparent is the fact that even the "Benjamin" was not to be indulged.‡ What may have been in some of Osler's communications to his parents at this time regarding his next step in life is not known, one letter (Appendix IX), addressed to him at Weston shows that the priesthood had been made his first choice of a calling, and in

* In the Toronto dailies of a few days previous to the date on the letter from his mother to which the figure refers had appeared the details of a police-court trial at which Sir William and several school-mates had been the defendants. An attempt to precipitate the eviction from the dormitory of a discharged caretaker and her daughter was the cause of the action. The boys were fined and admonished.—*The Leader, April 10th, 11th, 1866.*

† Statement of Miss Jeannette Osler.

‡ Many letters to Sir William from his mother begin with the greeting, "My——Benjamin."

the fall of 1867 Osler left Weston for Trinity University, entering as a student in the academic department (Fig. 16), preparatory to taking up the studies in divinity towards which his father's career and the intimacy with Johnson had evidently directed him.

To just what extent Johnson would have willingly influenced a lad's choice of his life's work is uncertain. The example daily set by him before the boys had probably more to do with the step in question than had any deliberate suasion, and it is to be remembered that the connection between the school and the university was defined and close, the one preparing for the other; Bovell, Badgley, Ambery, professors of Trinity, are spoken of as amongst the real founders of the Weston school; all were deeply interested in natural science, all were, or became, clerics; to the young man entrusted to their care, steeped in churchly traditions, persuaded of the range of a churchman's abilities by the accomplishments of a father and uncles, the association of the sciences with theology must have seemed a very natural one, and one the more to be thought of, because his next great inspiration, James Bovell. (Fig. 18), is clearly seen before him, teaching the most advanced and attractive science of the day and at the same time preparing for the spiritual life of his later years.

Of his progress in theology at the university we know nothing; the effect of this churchly and classical teaching is seen, however in all his writings and in his attitude to all matters ecclesiastical; but whether at Weston or at the divinity classes of Trinity it is evident that from the wonderful influence of Johnson and Bovell the young Osler never escaped; born naturalists, the trio scoured the countryside together, adding usually to Johnson's growing collection. It was these zoological expeditions which made most impression upon the family memory, and Johnson was in the habit of visiting his former pupil to assist in the explorations of the Dundas Marsh (Fig. 17) and other treasure-troves. The intimacy of the association with these two teachers and guides, an intimacy perhaps only possible to three such natures, explains best the subsequent course of Osler's life.

It was, however, the development of a new concentration of personal influence and directing that was the main feature of the life at Trinity. Bovell, the visitor and physician to the Weston school and co-worker with Johnson in the sciences, was at Trinity as the professor of Physiology and Chemistry,

FIG. 17.—The Dundas marsh, from the Burlington Heights.

and was the giver of lectures on "Physiology in its relation to natural theology"; as is well known he had helped to organize and unite to Trinity the Upper Canada Medical School, becoming later attached to the Toronto faculty; Sir William, already under his eye as a boy and as one interested in natural history became his student in a university where the small classes allowed an unusual degree of personal contact between the pupil and the teacher. This contact, in Osler's case, soon developed into an affectionate intimacy, and in these years the boy lived almost as the son of the Bovell household, where, in the master's freer moments, the wonders of natural history, and particularly its relations to man and the creator were further followed and discussed; hardly to be wondered at, is the discovery that the favourite and talented pupil was seen acting as demonstrator and intructor to his classmates in the teacher's frequent absences.* and Sir William may be said to have begun his teaching career whilst only just emerging from his boyhood. (Appendix X).

Bovell at this time stood as Saul amongst his brethren in his intellectual capacity; practitioner, consultant, co-operator in the founding of one medical school, editor of the first medical journal to be published in the province,† he was as stated above, the occupant of the chair in physiology and chemistry (appendix XI) at the new Anglican university of Trinity‡ and held at the same time the professorship of the Institutes of Medicine at the Toronto School. No one man in the Upper province had contributed more to the sciences (appendix XII), (Figs. 19, 20), and no one at that time had thought of or been capable of producing as scientific productions such volumes as, "Passing thoughts on man's relation to God" and "Outlines of Natural Theology," text-books of many pages, in which Darwinism is actively opposed; the title of his lectureship at Trinity, "Physiology in its relation to Natural Theology" may be taken as indicating that he was the church's

* Bovell's absentmindedness was notorious, and he frequently defaulted in his appointments; according to an old student, Canon Green, of Toronto, the appearance of Osler at the side door of Bovell's classroom often meant the cessation of lectures for the day, some new find in the Humber or the Don was the usual excuse.

† *The Upper Canada J. of Med. Surg. and Phys. Science*, 1851-52.

‡ Trinity University was incorporated by the Anglicans, in 1851, as a protest against the taking over by the government of King's College; an act of the year 1850 reconstituted King's College into the University of Toronto, suppressed the faculty of divinity and forbade the use of the Anglican church ritual

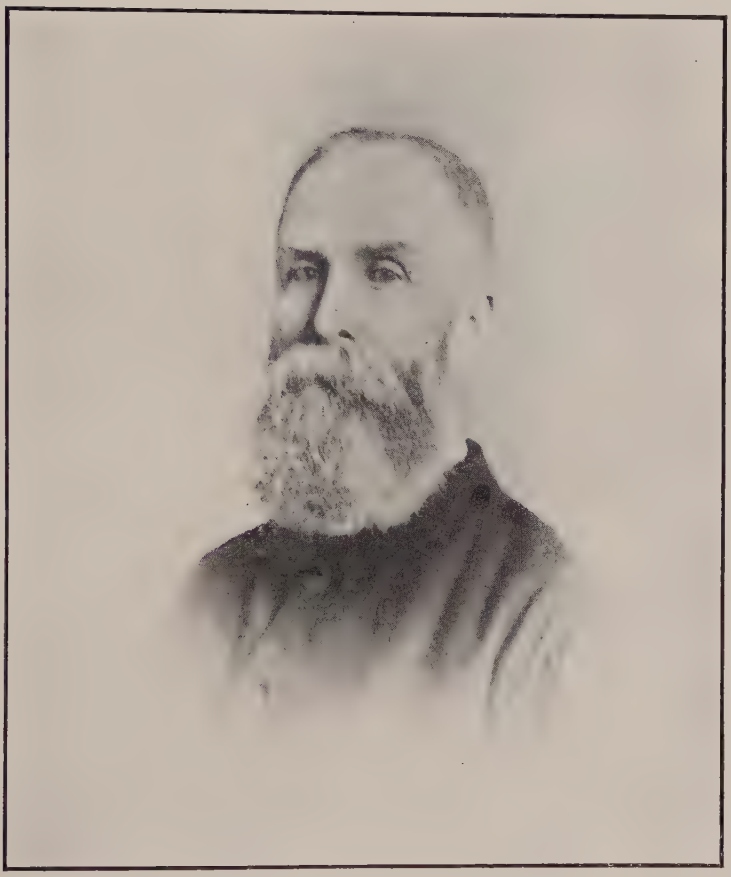


Fig. 18.—James Bovell.

NOTES ON SOME POINTS IN THE ANATOMY OF THE LEECH.

BY JAMES BOVELL, M. D.

PROFESSOR OF THE INSTITUTES OF MEDICINE, TRINITY COLLEGE, TORONTO.

Read before the Canadian Institute, December 15th, 1853.

Dugès, Home, Jones, and other distinguished anatomists, in their descriptions of the structure of the Leech have assigned to certain highly developed parts in this Annelid, functions which it was by no means clear to many more recent observers, could legitimately be performed by them. It was reserved, however, for Dr. Williams, of Swansea, a highly distinguished comparative anatomist, to unravel the mystery, and to furnish proof of the errors into which his predecessors had fallen.

The existence of an elaborate circulating system seemed to necessitate an ærating one equally developed in character; but spiral vessels, on the type of insecta, no where being seen, the vascular-walled pouches, occupying the lateral regions of the body, seemed to be the organs of respiration, supplied freely with blood by vascular hearts. While many doubted the existence of so special an organization for respiration in this creature as was described, no one before Dr. Williams had assigned them to the generative apparatus, and as I believe that the observations which have been repeated here confirm the results arrived at by the Naturalist of Swansea, I thought it of sufficient interest to bring the subject before the Institute. I cannot, however, agree with Dr Williams that the generative organs are rightly described, even by himself. In order to understand the subject, as now unfolded to us, it may be more advantageous to state the opinion of one of the highest authorities.

Mr. Jones, in his "Animal Kingdom," observes: "Two lateral vessels are appropriated to the supply of the respiratory system, and in them the blood moves in a circle quite independent of that formed by the dorsal artery and ventral vein, although they all communicate freely by means *of cross branches*, those passing from the lateral vessels to the dorsal being called by Dugès dorso-lateral while those which join the lateral trunks to the ventral canal are the latero-abdominal branches. The movement of the blood in the lateral or respiratory system of vessels is quite distinct from that which is accomplished in the dorso-ventral system or systemic.

On examining one of the respiratory pouches, its membranous walls are seen to be covered with very fine vascular ramifications, derived from two sources; the latero-abdominal vessel gives off

138 FIG. 19.—Title page, "Anatomy of the Leech" by James Bovell.

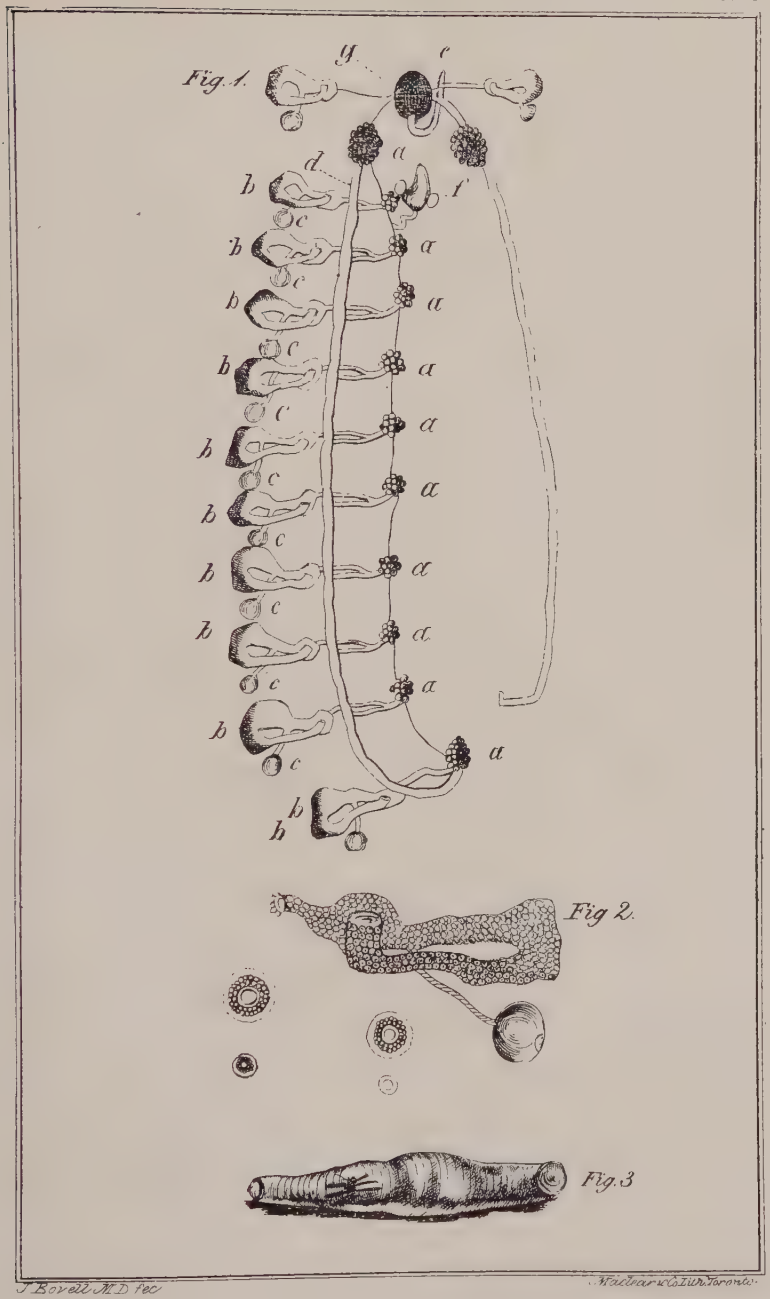


FIG. 20.—Original drawing by Bovell 139

From "The Anatomy of the Leech."

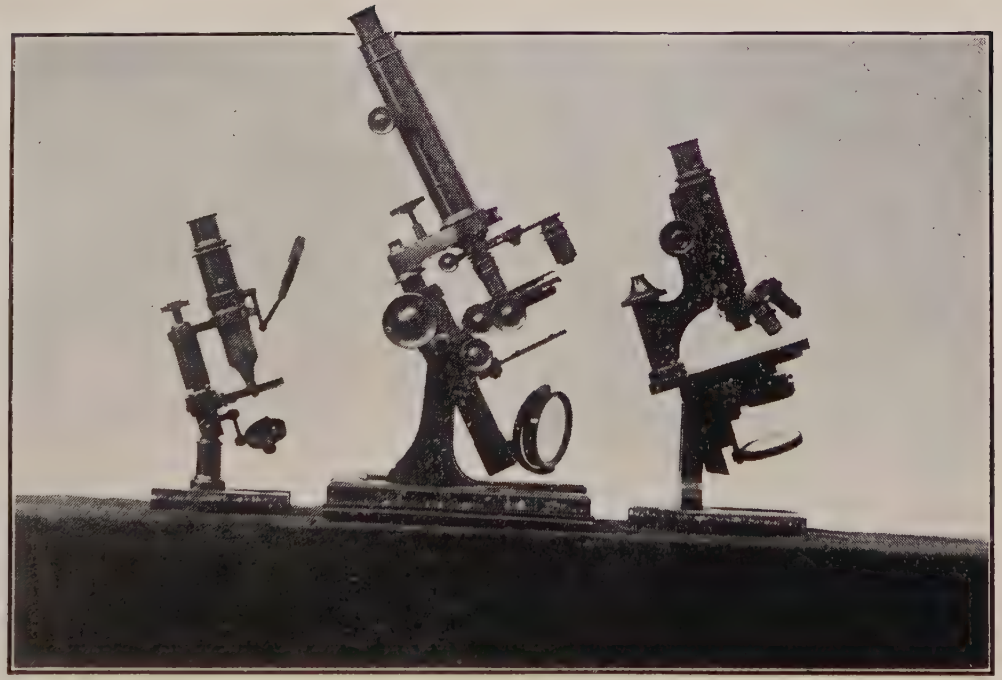


FIG. 21.—Tools of the "Master Workman's" trade: The microscopes used by Osler. The middle one is Johnson's microscope, through which Osler first "saw the light." The small one belongs to Dr. A. H. Walker, of Toronto, formerly of Dundas; early scientific work was done with this. The one to the right was used by Osler after graduation.

spokesman against the newer ideas. The "Outlines of Natural Theology," (Nature as created by God), shows Bovell to have had a far-reaching knowledge of all the natural sciences; clearly evident from these and other contributions (Appendix XIII) are his many strong religious convictions, and the effect of the accumulation of these is seen in his giving up all his medical associations in the year 1870 and entering the church; interesting is the fact that at the time of these growing convictions on the part of the master, Osler was most directly under his care and guidance.

Other stimulating conditions existed at Trinity and may be briefly touched upon. Classics was in the hands of another leader interested in Weston and its boys, one who could find time for an instructive diversion. The Ambery prize offered at Weston for the best collection of geological, botanical or entomological specimens speaks for the breadth of mind of this teacher of Latin and Greek; as curator of a growing museum with Bovell* was associated the Reverend C. J. S. Bethune, an enthusiast who well remembers taking their favoured student Osler to the entomological gatherings, then a feature of the academic life, in the early Trinity days.† It can have been no dry divinity that was handed out to the eager young student by these devout dispensers.

The association with this earnestly working group of men had far reaching but unlooked for effects. The natural sciences, a diversion, certainly, in the lives of some of these, Sir William's teachers—became to him an absorbing interest, and the vision of a life in the Church quietly faded, as his eyes and mind followed the workings of Nature through the old Johnson microscope, or through the newer instrument (Fig. 21) now entrusted to him in the consulting room of his close friend, Dr. Holford Walker, of Dundas. (Appendix XIV). The end of the term 1867-68 found him debating the wisdom of the decisions that had started him upon the road followed by Johnson and Bovell, and the suggestions made by a friend that he begin in medicine were listened to and acted upon.‡ Early in '68 further work at Bovell's house and

*In all the early Trinity University announcements Bovell figures as the curator of the museum.

†Personal communication from the Rev'd C. J. S. Bethune, one of the successors of Johnson when the Weston school moved to Port Hope, and who in his later years was the Entomologist at the Ontario Agricultural College.

‡The late A. Jukes Johnson recalled that in the spring of 1868, while walking with Osler, the question came up of Osler's continuing in divinity. Stopping to say their farewell on the corner where now stands the Academy of Medicine of Toronto, he, Jukes Johnson, said, "Willie, you are not meant for divinity, why don't you come back and work with us again at Bovell's."

laboratory was commenced, work more in the line with the medical studies now to be pursued, and entering the Toronto School of Medicine, Sir William began those fifty-two years of uninterrupted productive activities which have so materially influenced the medicine of the world.

Accessible records of the old Toronto school do not seem to exist. Old Trinity calendars show that from 1867 a degree in medicine was granted to students who, amongst other requirements, had "kept three terms in the arts course of the university, had attended the whole course of study and had passed the examinations in the Toronto School of Medicine." Bovell had joined this school after the disruption of the Trinity Medical Faculty.* and lectured in physiology and pathology up to his leaving Canada in 1870. The reason for Sir William entering this, a proprietary school of medicine, was apparent; he would still be at the feet of the master. From 1866 to 1870 he was thus continually and more or less directly under the guidance of Bovell. Unfortunately, there are but shadowy memories to be recalled of these days; three of the family were now in Toronto and much of the correspondence would have taken place through them; the persistent study of natural history continued, a well framed collection of insects was made,† the elder sister was at times enthusiastically instructed in microscopical animal life.‡ More positive recollections on the part of his preceptor's daughter are recorded below.

In any analysis of Sir William's life one may doubt if sufficient consideration can be given to this period of his youth and training. His association with Johnson and Bovell had put him at once in touch with the best thought in natural history and its connection with the religious ideas of the time; the great questions of evolution and of life, and the names associated therewith were eagerly discussed.** A notebook of Johnson's relating to the contents of his microscopic cabinet shows that the young Osler contributed actively to this wonderful collection so beautifully

*Bovell's association with Trinity at the time of Osler's entry there, was as teacher and instructor in the university, Trinity Medical faculty having ceased to exist. The Toronto School of Medicine was now the stage of his greater activities; he held the chair of the Institutes of Medicine in this school.

†Seen by the writer about 1890. The collection disappeared when the Toronto home was broken up after the death of Sir William's mother.

‡Statement of the late Mrs. E. M. Williamson, Sir William's elder sister.

**Statement of the late Arthur Jukes Johnson. Both Johnson and Bovell entered actively into such discussions.

catalogued by the master, while the publications in the *Canadian Naturalist* of the work done before Sir William arrived in Montreal shows the result of inspiring teaching upon the keen initiative of the student in a way that compels admiration.

In 1870 Sir William left Toronto for Montreal, the second newly blazed trail in his young career. Concerning the reason for this step many conjectures have been made, and a few definite facts stand out. Montreal was far away, but in 1829 the medical faculty of McGill had become an established and permanent organization. The Toronto school announced regularly that "lectures correspond to the requirements of the medical faculty of the university of McGill college, this school having been recognized by that institution." McGill's curriculum was probably known to the Toronto students; possibly through these channels, possibly through conversation with McGill graduates, the keen seeker for the best men and methods realized "that the hospital facilities in Montreal were better" for such is his father's written statement at the time.* Bovell was going, was indeed gone; the influence that to Osler had been the leading kindly light for years was no longer there to be looked to, the temptation towards "better hospital facilities" met now with no resistance.

Beyond this period of Sir William's life I have hesitated to proceed; others better versed in biographical descriptions have detailed the progress of his later years in a variety of heart-felt tributes. In one direction only do I feel that I may venture, and into that solely from the accident of having lived in the various places through which he had progressed, and of having known intimately, though—years later, many of his earlier associates. An idea unique in its boldness came to him early, its cultivation allowed his great accomplishments, its diffusion at his hands has produced a remarkable succession of students, who, as a result of his influence have vigorously assisted in the great forward movement of the medicine of to-day.

IV. The Idea and its Cultivation

Listening to the happy "round the table talks" in the Baltimore days, many of us remember to have heard Sir William say,

* Owing to the dissensions of the times and the poor support of the city and province, the Toronto General Hospital was closed for ten months in 1868 and 69. When it was re-opened there were but twenty-five free beds for the teaching of medicine.

"the average physician wastes fifty to sixty per cent. of his time in going from place to place or in the repetition of uninstructive details of practice." It was his way of introducing the thought to his students, and from this practical remark many consultants of to-day took the hint that set them on a thinking way. His method or idea was an established success by that time. During his years in Philadelphia it was on trial and his methods were under close observation. "He was only beginning to get consulting work when he left us," was the final verdict of the unthinking. "When he announced that he would take no maternity cases we told him that no physician in Philadelphia could practise successfully without doing so" was the statement made to me by the late J. H. Musser; while in the words of his great admirer, S. Weir Mitchell, that cultured *doyen* of the medical fraternity of Philadelphia, "When he said he would do no general practice we were ready to wash our hands of him as a young fool."

Of his "Way of Life" in Montreal, I have no direct knowledge, but the germ of the idea just now so strongly criticized was found in pure culture in Toronto. As early as his student days the wastage in a day's time suffered by his great teacher Bovell had impressed him strongly; youth as he then was, he gathered the Bovell family together and tried to persuade them to make Bovell retire into consulting work; he even offered to manage the office details. (Appendix XV). Bovell's nature, however, was not such that he could ever resist the appeal of an importuning patient; no one had ever considered the practice of medicine in such a light, and the originality of the idea was plainly beyond his simple comprehension. To Osler on the other hand, this practical economy in time was clearly an important part in a well-constructed "way of life."

This finishes a simple sketch, a sketch in which the usual presiding geniuses of a man's career are very clearly visible; from some one in their dim ancestry Sir William and the uncle Edward had acquired a real scientific and literary inheritance; the environment of the country parsonage, the atmosphere of education, the classical schools, the clerical naturalists of Weston and Trinity, Johnson and Bovell, fashioned well this precious gift, whilst the training of a thinking progressive father, of a watchful and affectionate mother made easier the progress through the world of the man whom we will ever delight to call—the great physician—the beloved son of old McGill.

APPENDIX

I

Extracts from the letters of Edward Osler, Sr. (Sir William's grandfather) written in 1829 to his son Featherstone, showing his attitude to another son Edward, Jr., (Sir William's uncle), to his leanings towards literature and science, and to his breaking away from commerce and seafaring:

"Frittering away his life as his elder brothers have done.....Edward is busily engaged in superintending the printing of his poem—"The Voyage " I can offer no opinion except that I hope he will not attempt anything of this sort again.....'Why can't he earn an honest living at the sea, as his brother has done?'"

II

Titles of Publications by Edward Osler, Jr., showing his literary proclivities and achievements.

The Voyage, Poem. A line in it, quoted by F. Osler, reads—'Based on the clouds a mountain in the sky' (A volcano).

Papers *On Burrowing and Boring Marine Animals*, and *On the Anatomy of the Marine Mollusca*, by Edward Osler, for the Royal Society, 1826 and 1832.

("I have received the proofs of my paper from the Royal Society. The plates are beautifully done." From a letter by Edward Osler to Sir William's father.

The Life of Admiral Viscount Exmouth, by Edward Osler, Esq., London. Smith, Elder & Co., Cornhill, 1835.

Church and King, by Edward Osler, formerly one of the Surgeons to the Swansea Infirmary. London, Smith, Elder & Co., Cornhill, 1837.

III

Extracts from the diary of Featherstone Osler (Sir William's Father), bearing upon his active seafaring life and his subsequent career as a missionary.

"I was born at Falmouth, December 14th, 1805. My father was a merchant and shipowner. Several members of the family were connected with the sea: my grandfather Osler died in the West Indies from the effects of a wound: one uncle was killed in action with a French privateer:—a cousin, a lieutenant in the Royal Navy died of yellow fever in the West Indies..... In opposition to the wishes of all my friends, I determined to go to sea and made my first voyage.....the masts snapped off; we drifted, a wreck upon the ocean for several weeks. At length we reached Malta; refitted and returned to England.....I then joined the Royal Navy and served on the *Cynthia* till wrecked on the Cobbler Rocks, Barbadoes; we suffered much but were rescued by H.M.S. Eden: yellow fever broke out among the survivors: we were sent to cruise as a pest ship.....I was placed upon the books of H.M.S. Britannia and then for a short time on the Victory, Nelson's ship. Subsequently, I was appointed to the *Tribune*. For two years I served in the *Tribune*, then joined the *Warspite*.....He kept his promise by promoting me to the *Algerine*: I served in her two years, cruising around the Cape of Good Hope and the Indian Ocean.....On our return to Rio from Mauritius I obtained leave to go home and took passage on the *Rinaldo*, and not more than two hours after a frigate had arrived on her way to the East Indies on special service. The Officer in charge of the scientific department had died on passage and the captain applied to Sir Thomas Baker to appoint his successor. The Admiral was pleased to say that I was the man for the appointment. I declined this tempting offer..... ..I had often before thought of taking holy orders. In October, 1833, I entered St. Catharine's Hall,

Cambridge.....My prospects of advancement were very good: everything seemed to point to my remaining in England up to the close of 1836, when Bishop Stewart, of Quebec, wrote a strong appeal to his nephew, the Earl of Galloway, urging him to procure some help for Canada. He, the Marquis of Cholmondely, and Sir Walter Farquhar interested other members of society and formed what was called the "Upper Canada Clergy Society" .....One Sunday morning I received a letter from this society to this effect:—"You have been abroad a great deal, therefore, it would not be so much for you to go abroad as for many others.....is it not your duty to go out."..... I consented to go as missionary of the Upper Canada Clergy Society for five years.

IV

Extract from a Letter written by Featherstone Osler as a sailor during his seafaring life, to the Rev. Edward D. Lake, indicating his religious convictions.

To—Rev'd Edward D. Lake,

"My Very Dear Sir:

It was with great pleasure I received your kind note having been anxiously expecting it and would have answered it immediately but for the opportunity of sending in your Box for Paddington Row. Your very kind invitation I gladly accept and hope should nothing prevent it to leave London for Worcester on Monday morning. I take your offer that I may come and thank you for all kindness. I do now hope to know what true religion is and that again leaving England I may be commended to the saving of the soul. My heart is hard but He can soften and humble it and my prayer is for a new Heart and faith to believe in my Saviour and Redeemer, as I ought. You will be glad to hear that I have passed my examination with credit and to-day hope to see Colonel Dundas, one of the Lords of the Admiralty, and then all my business in this busy city will be finished. Sometime before passing my examination, I prayed and said like Jacob of old,—If the Lord will now be with me and guard and protect me in the way I should go, then the Lord shall be my God and I will endeavour to cleave to Him with my whole heart. My prayer is granted and I may be assisted by the Holy Spirit to perform what I have promised.

"I will endeavour to hear Mr. H., Sunday morning and evening, and Mr. Wilkinson in the afternoon. It was not till Monday I received your note or I would have seen him Friday.

"The Cholera Morbus is not decreasing in London and from all accounts it is a dreadful disease. Twenty-four hours generally decides the fate of those attacked by it. I believe the average death rate is sixty deaths to forty recoveries. It is God's judgment on the earth, and well we deserve it. Yesterday there were official accounts of the cholera being in Paris and the people I think are greatly alarmed."

V

Mother's Letter dealing with the question of Music and Dancing, Dundas, March 2nd, 1866.

Dundas, March 2nd, 1866.

"My Very Dear Willie:

My scrap of a note, etc.....

I fancy the first thing you wish to know is about the music, and after all the pros and cons we have decided that you may take the first quarter as a trial, you will then see whether you really have time enough for it or like it enough to persevere through the uphill work which you may expect to find it for a time. Will you have an opportunity of practicing or be dependent on the weekly lessons for an hour?

"By this time I daresay you are in good working order in the school routine and are going on steadily with your studies, able to rise early without great effort, and doing whatever your hand findeth to do, 'heartily as unto the Lord,'

I should rejoice to hope, and do not forget the good old Mr. Hainsel's advice which also is the God-inspired advice of the wisest man, none go wrong who follow it; in case you have allowed it to slip your memory I may as well write it—'Remember now thy creator in the days of thy youth.'

Ever your loving Mother,
Ellen Osler."

VI

Dundas, March 19th, 1866.

"My Dear Willie:

.....I do not know exactly when the school reopens but hope you will not be behind the right time in returning.

"It was an unfortunate affair, that of all you boys being brought into public notice in such a disreputable way, and although I do not think it was meant to be more than a mere school-boy prank, such things often tell against a person long after, and I hear many say they think it will injure the reputation of the school. We are told to do unto others, as we would they should do unto us, and if we only followed this golden rule, we should be more careful not only in our outward actions to others, but of our thoughts and words. We heard from Mr. Badgely the same day we had your letter telling us of the matter, and since then we have had the school report which on the whole was satisfactory.

"Could you only know, my dear boy, how earnestly my heart longs to see you walking in the paths of holiness, you would, I think, strive to do well.

Ever your loving mother,
Ellen Osler."

VII

Extracts from Letters from his mother detailing home training.

Dundas, March 27th, 1866.

"My Dear Willie:

If you erred through ignorance I freely forgive you, especially after receiving your nice letter yesterday, but know now and forever, that it is a long established custom in the polite world (to say nothing of stronger ties) that when an individual has been an inmate of a family for a season, to intimate to that family his safe arrival at home or elsewhere. So I hope you will understand for the future.....

"God bless you my dear boy,

Ever your loving mother,
Ellen Osler."

VIII

Letter from his mother to William Osler, March 27th, 1868.

"Perhaps the time is not all lost when we are laid by from our duties, but is meant for our good and it is our own fault if we are not bettered by it."

IX

Letter from his mother to William Osler.

"And now, my dear boy, let me have a little serious chat with you about entering the church, which you say you have made up your mind to do. My first impulse was to thank God that He had heard my prayer, and inclined one of my six boys to make choice of that as his path in life. It is a matter not to be decided on hastily any more than is any other profession. Take your time for consideration and above all search your heart for the motive inducing your decision, for remember that God always judges us by our motives, while man can only judge of our actions. If you ask of God He will give you wisdom and guide you in the right path, and without His guidance in all things we are sure to err. I am quite sure that if you do seriously and in earnest desire to be fitted for the service of God in His church, papa will do all he can to help you forward."—May 30th, 1867.

X

Letter from Col. MacQueen indicating that Sir William was early taking part in the instruction of students with Bovell.

"As a student at Trinity University in the year 1870, I can remember taking Dr. Bovell's lectures in Sciences, probably Physiology, and seeing Osler acting as assistant in demonstrations; at times it seems that Bovell might be absent and Osler would take the demonstration or the lecture; my memory is, that we students had occasionally discussed the young teacher and his performances and had been impressed by the fact that one of his years had been able to stand over us and play the part of teacher."

(Signed) *Fred. W. MacQueen, Toronto.*

XI

Extracts from Calendar of Trinity University for 1863, Relating to Prof. Bovell's Lectures, Status and activities.

"The Subject of these lectures is Physiology in its Relation to Natural Theology."

Museum—Joint Curators.
Hon. J. W. Allan. James Bovell. N. Y. Hand, M.A.
Professor of Physiology.....James Bovell, M.D.
Dr. Bovell's Medal for Essay in Natural History.

1865—Professor of Physiology and Chemistry.....James Bovell, M.D.
Chemical Philosophy. Experimental Philosophy, Practical Chemistry, Toxicology, Natural Theology, Moral Philosophy.

XII

Bovell's contributions to the medical journals were numerous and easily found. His scientific publications are listed in the catalogue of the Canadian Institute of which society he was a most enthusiastic member; the following may be quoted:

1. Original views on the renal circulation. J. Bovell, *Canadian Journal* 1854. "The Malpighian tufts, the true renal secreting apparatus and the water of the urine was supplied by the venous plexus of the tubuli uriniferi."

2. The transfusion of milk as practiced in cholera at the cholera sheds. James Bovell, *Canadian Journal*, 1855. (Bovell evidently proposed the matter to Dr. Hodder, as the statement is that the latter was satisfied with the physiological data as supplied by Bovell, and consented to the performance of transfusion.

3. Passing visits to Rice Lake, Humber River, Grenadiers' Pond and the Island. Natural history explorations with several plates, by Drs. Goadby and Bovell, *Canadian Journal*, 1855.

4. Additional observations on the anatomy of the bear and lobster. James Bovell, *Canadian Journal*, 1855.

5. Anatomy of the leech, with plate drawn by Bovell. *Canadian Journal*, 1856.

6. Notes on the preservation of some infusoria with a view to the display of the cilia. James Bovell, M.D., Trinity College. *Canadian Journal*, 1863. 2nd series.

7. On growth and repair. James Bovell, M.D. *Canadian Journal*, March, 1863.

8. A plea for inebriate asylums.

XIII

Bovell's contributions on theological subjects:—

Preparation for the Christian sacrifice; Communion for the sick; Constitution and canons of the synod of the diocese of Toronto, 1858; Preparations for the Holy Communion, 1859; Outlines of the History of the British

Church; Passing thoughts on man's relation to God and God's relation to man, an octavo of 400 pp. 1862; Outlines of Natural Theology, a quarto of 500 pp. The world at the advent of the Lord Jesus. Toronto. W. C. Chewett & Co., 1865, 412p.

XIV

Letter from Dr. H. Walker on the reason for Sir William Osler's leaving the Church for medicine.

"Working with me in the office in Dundas and studying with me the microscopical life of the Dundas marsh in the years 1867-8-9 (the summer holidays), I can remember Osler as he looked down my old microscope and his saying something in this line ..... 'This is the work for me. I am going no further in the studies for Divinity.'

Frequent references were also made as to the wonderful powers and qualities of Bovell and there was every indication that Divinity would no longer hold him. It must have been announced to his father and been a great blow to his parent, for he arrived in anger one day to see me, and more or less accused me of being responsible for the change of thought. 'I had thought that at least one of my six sons would follow the calling of their father,' were his words."

XV

Letter from Mrs. Fred Barwick, Dr. Bovell's daughter, indicating the early beginning of the "Osler idea."

"Amongst my recollections of Sir William Osler at the time when he was in Toronto and constantly with my father, Dr. Bovell, was an interesting detail. He had evidently recognised the value of time and saw that my father had to give a large part of his day to general work and to things which seemed to absorb him to the detriment of the work which Osler thought more important, *viz.*, the consulting practice and teaching. He seriously urged us to try to induce our father to retire into consulting work and even offered to take on himself some of the office details; our father, however, was too much absorbed in his general practice to be able to let go at his age."

(Signed) *Alice Booth Barwick.*

OSLER, AS NATURALIST

John L. Todd, M.D.

Montreal

"NATURALIST" is an old-fashioned word. It is used here because all things in nature were of interest to Osler.

He became a physician; but he was first a man. In his profession he lives; but he is best remembered and most loved for his great humanity.

His knowledge of medicine and the manner of his practice in it won admiration and brought many to him; but, above all other things, his deep and manly understanding commanded love and respect. In his life's work as a physician, Osler was first and always a naturalist, for in it he loved and strove to understand his

fellowmen: just as, when still a boy, he had loved and striven to understand the nature of lesser beings.

Osler was born in the country. His childhood was passed in natural surroundings. Through his daily life, habits of observation became his. He learned early that, with seeing eyes, rare things may be found in much travelled fields. He learned early too, the fascination of finding-out for oneself. The training given by his early surroundings and by the first of his teachers, the Rev. W. A. Johnson, who taught him to use a microscope, made Osler exact in observation, careful in his notes, and accurate in his reference to sources of information. It taught him that theory without fact profits nothing. Through it he learned that human knowledge has its limitations—boundaries which may be extended by patient observation, careful study and comprehension of observed fact. To try all things became a part of him.

So schooled, his mind was exact; no detail was unimportant because it was a detail. He learned to use his microscope; he took it with him wherever he went and thereby learned to use and rely upon whatever instruments might be necessary to give the widest powers to the perception of his senses. He acquired habits of regular and constant effort. Opportunities, which Osler always took, are never absent from a naturalist. In the accurate observations, recorded before he was twenty, on a case of trichiniasis,[3] there is the same statement of, and reliance upon, recorded observation which, a few years later, speaks in his frequent reference to lists of cases studied at the Montreal General Hospital.

When he was eighteen, Osler made field observations which were quoted later[4] in a paper on the Canadian Fresh-Water Polyzoa.* In 1870, when he was twenty years of age, Osler described[2] the Diatoms observed by him and published a list of

*A complete list of Osler's early contributions to Natural History is published in the classified bibliography of his Canadian period which appears in this Bulletin and elsewhere.[1]

[1]1867-1885, Classified Bibliography of Sir William Osler's Canadian Period. *The Osler Memorial Number of The Can. Med. Assen., Jl.*, July, 1920. By Dr. Maude E. Abbott.

[2]1870—Canadian Diatomaceae. By William Osler. *Canadian Nat.*, June 1870, n.s., v. 142-151. Collected reprints, Vol. i, No. 1.

[3]1876—*Trichina spiralis*. Idem. Extract from a lecture on "Animal Parasites and their Relation to Public Health." One of the Somerville lectures of the Natural History Society. Idem. *Can. Jl. of Med. Science*, 1876, i, 134-135; 175-176. Collected reprints, Vol. 1, p. 11.

[4]1877—On Canadian Fresh-Water Polyzoa. William Osler. *Canadian Nat.*, 1883, n.s., x, 399-406. Collected reprints, Vol. ii, No. 53.

one hundred and ten species found in various localities in Ontario; wherever he went he observed and studied; the paper flows uninterruptedly in beautiful English. Later, through membership in the Natural History Society of Montreal, an interest in biological matters outside the practice and study of medicine widened his understanding and brought him into contact with men whose minds worked in widely differing fields. One of the papers which he read before this Society describes parasites found in the blood of a frog[5]. Careful references are given to all that was then published on the trypanosomes and drepanidia. The illustrations are good for the time and the descriptions are perfect. There is evidenced in the description of the moving drepanidia the same intense interest, the same anxiety for accurately recording observed fact, that Osler showed years later in his work at Baltimore on the human parasites of malaria and of amoebic dysentery.

Among his early writings are other articles[3, 6, 7] on parasitic diseases. Their simple language and orderly arrangement of matter are characteristic of him. Ideas are clearly expressed and well-chosen words lead in lucid continuity to definite conclusions.

Always before commencing an exposition of his subject Osler learned all that his methods of examination and of experiment could teach. He read all that the world's best opinion expressed in English, French and German. And only then his writing commenced. All of these papers are remarkable for their quiet impersonal presentation. There is no insistence in them on the enormous amount of work upon which they are based. It is arduous, for example[7], to examine over one thousand swine for *Trichinae*, *Cysticerci* and *Echinococci*. These papers are remarkable, too, for their sound common-sense. They were written at a time when the public were greatly exercised by the occurrence of epidemics of trichiniasis. The author refuses to be stampeded and concludes that man's best protection against trichiniasis and tape-worm is a careful cooking of his food.

---

[5]1880—On Certain Parasites in the Blood of the Frog. Idem. *Canadian Nat.*, 1883, n.s., x, 406-410. Collected reprints, Vol. ii, No. 52.

[6]1883—Cestode Tuberculosis. Idem. *Americ. Veterinary Review*, April, 1882. Collected reprints, Vol. ii, p. 49.

[7]1883—An investigation into the Parasites in the Pork Supply of Montreal. Idem. *Canad. Med. & Surg. Jl.*, Montreal, 1883. Collected reprints, Vol. ii. p. 54.

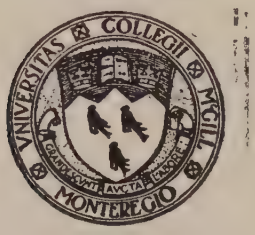
Often in these early papers a characteristic, cheerful, Oslerian touch appears. There is allusion here and there, to associated ideas, sometimes apparently far from the point at issue, which flitted through his active, versatile, and extraordinarily well-furnished mind. They often throw a quaint side-light at once illuminating the author's thought and fixing it indelibly in the reader's mind. That he relies upon his own experience for his conclusions is evidenced by the frequent description of observations that are unmistakably personal. His humour often finds expression in subtle, and often hidden, reference. Sometimes, the jest is made in apparent play; at others, there is intent, and the jest is made with a calculated knowledge of the psychology of the medical man and student. Sometimes the subtleness becomes broader as when, in his study on *Trichina spiralis*, he alludes to the "barbarous custom" in Germany of eating half-cooked, or wholly uncooked sausages as "semi-cannibalism." The word is shrewdly chosen. Sometimes a witticism, that to lesser minds was broad, bore a protest that men should hold some things in life as clean and others unclean, when clear sight and understanding should see that all things are Nature's.

Osler bore Hippocratic fidelity to his teachers. Just as his early surroundings influenced his own development, so has his life influenced the great Medical Schools with which he was connected. There can be recognized in their customs and traditions the influence which Osler, by his habits of life and thought, had upon his colleagues and upon the teachings of medicine in the Schools which once were his. "The great possession of any University is its great names." Favoured are the Schools that can write Osler as theirs.

The Medical Faculty of McGill University, 1881

Wm. Osler Geo. Ross F. J. Shepherd

About 1878-9



OSLER'S MONTREAL PERIOD*

A Personal Reminiscence

Francis J. Shepherd, M.D., LL.D., F.R.C.S. Eng.

Montreal

As a fellow-student and colleague for many years, and a life-long friend, I feel that I can speak of our dear friend the late Sir William Osler, with some knowledge. It is, however, difficult to express adequately the great loss the profession of Medicine has sustained, not only on this continent, but in Europe also.

As I remember him first, he was a slim, keen-eyed, active young fellow, of medium height, with rather an olive complexion. He looked more like a Spaniard than an Anglo-Saxon. He was full of energy and industry, was devoted to his microscope, and was always found in the autopsy-room or in the wards of the Hospital. Lectures did not trouble him much, and he never took elaborate notes as it was the fashion to do in those days. He took no high place in his class, but received a special prize for his graduation thesis, on account of its great originality.

He always had ecclesiastical tendencies; his father was a parson; he was educated at a High Church School (Trinity), and a Church of England College, and was a divinity student for one year. While a student he always attended service at a neighboring ritualistic church before breakfast. I have often said that if he had been born in the 12th century he would have been a monk and probably a second Hugo, Bishop of Lichfield. He was steeped in the wisdom of Plato, Marcus Aurelius and Sir Thomas Browne, and he knew the Bible better than many clergymen.

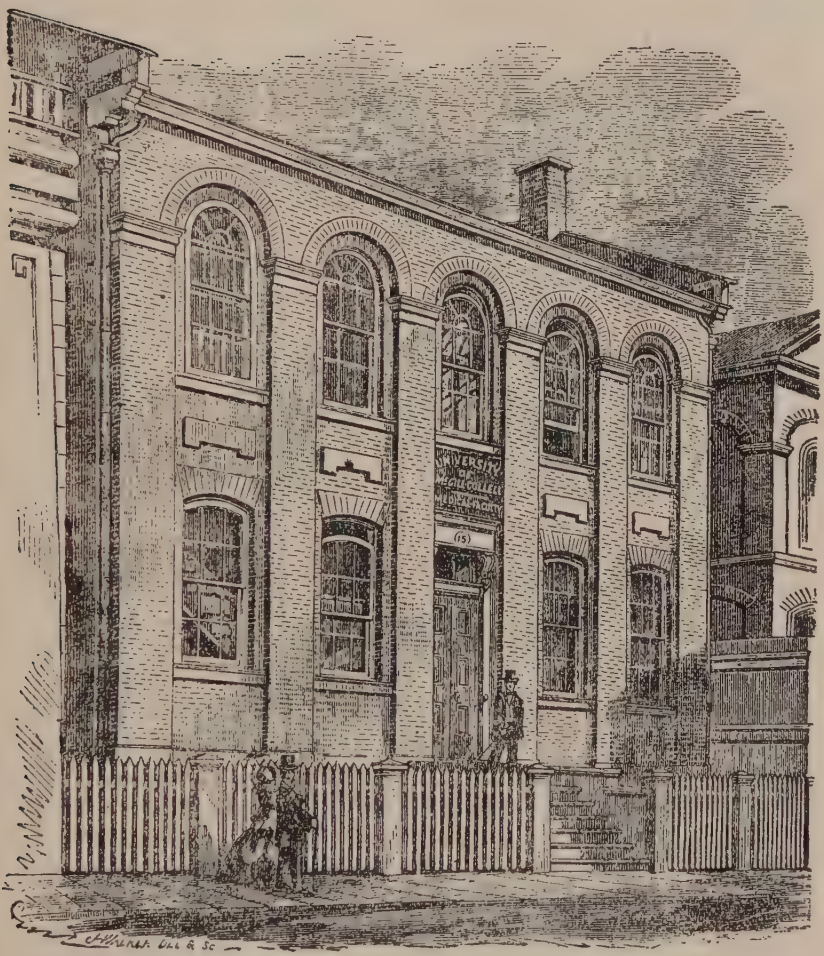
*From a hitherto unpublished Address delivered at the Osler Memorial Meeting of the New York Academy of Medicine, Feb., 1920.

After two years abroad, when he was a student in London, Berlin and Vienna, he returned to his Alma Mater as Professor of the Institutes of Medicine, succeeding Professor Drake who had resigned. He often said he never expected anything more than a lectureship, but the Faculty took a bold step, chiefly through the influence of Dr. Palmer Howard, and appointed him a Professor at twenty-five.

As I observed him in his early days he always had a most joyous temperament, always thinking the best of everybody and everything, continually making new friends, but never forgetting the old ones.

His was a very stimulating personality, and a very suggestive. Hundreds of young medical men looked up to him and revered him as a father, and loved him. It was this power of evoking the love of his fellow workers that most distinguished him. He was a most human individual and was full of sympathy and always interested in his co-workers. They could not help loving him. They were drawn to him as to a magnet. He never sought popularity. It came to him. His sense of humor was very strong and with him was a saving grace. He was fond of practical jokes but they were never malicious and always perpetrated on his colleagues. He was beloved by all children and in McGill days whilst walking up the College Avenue to his University lecture his progress was much interrupted by meeting and greeting his many children friends on their way to school.

In every city the medical men are divided into groups more or less antagonistic, especially where there are rival medical schools. While in Montreal he contrived to harmonize these factions and at the Medico-Chirurgical Society under his influence they worked peaceably together, and, in consequence, this Society did much good work. At the Veterinary School he was a great power and, aided by Duncan McEachern, F.R.V.C.S., he did much to introduce scientific methods of teaching at the same time improving his knowledge of comparative pathology. In the University he made morbid anatomy an important subject and, he was the first pathologist to the Montreal General Hospital. In the wards of that Institution he, with the late Dr. George Ross, taught clinical medicine in a most interesting and instructive manner, making the student take an active part in reporting and observing the cases. They adopted the methods of Murchison



MEDICAL FACULTY, MCGILL UNIVERSITY, COTÉ STREET, 1871

The Coté Street Building, occupied by the Medical Faculty of McGill in 1871, and from which Osler graduated in 1872.

of St. Thomas Hospital, London, with whom they had spent the summer of 1878. Ross taught in winter and Osler in summer. In fact before Osler was appointed to the hospital Ross had instituted methods of teaching afterwards adopted by Osler.

As I said before Osler was always the friend of the student and the young practitioner. He advised them as to lines of work and suggested ways and methods and was always personally interested. He infected them with his own enthusiasm and love for science, for he was a most inspiring person and his energy was untiring. His incursions into all forms of classical and ancient literature were extensive and his retentive memory always furnished him with an apt quotation or a suitable application.

When in Montreal he had little practice, for he always said practice and science were not compatible. He had an office, but few knew his office hours, and whatever they were he never kept them. His weekly demonstrations on Morbid Anatomy, Human and Comparative, were very popular and were attended by numbers of medical men as well as students. He was one of the first to insist on the contagiousness of tuberculosis also the possibility of transferring bovine tuberculosis to man, but at that time he had few followers in Montreal. Before he left Montreal he had acquired some consulting practice. He was fond of telling that on one occasion, having had a consultation with an old and taciturn man on a case of typhoid fever which the old doctor had failed to recognize, after the consultation the old doctor said to Osler, "Young man, you talk too much. You have told these people more in fifteen minutes than I have in fifteen years." Osler said he took this rebuke to heart and never forgot it.

When he decided to accept the call to Philadelphia we were all very sorrowful, for he was much beloved. Still the spirit he had infused remained behind and so did his methods. He never lost interest in his Alma Mater, and as a touching token of his love for her he has bequeathed to her his rare and valuable library of old medical books, and requested that his ashes be deposited with his books in the McGill Medical Library. I shall never forget the parting dinner we gave him, and the noble speech made by his friend and teacher Dr. Palmer Howard, and Osler's feeling reply, which was often interrupted by his emotion.

His addresses to medical men and students were always most illuminating, full of humor, but with a foundation of serious advice

and sensible direction as to conduct and ethics. His biographical essays pointed out continually that the way of success was by work, and persistent work. Of course there must be a basis of talent and worth. His influence on medical education was enormous in the United States and Canada, not only by his immediate example, but through the number of trained disciples he sent out to preach his gospel and to pass on the Osler tradition.

On entering a ward one could see how much he was beloved by all; his kindly manner and genial presence set everyone at his ease and work proceeded without interruption. The student who had omitted to do his part was severely reprimanded in a quiet, sarcastic way, and he remembered it,—Osler could be very severe on occasions. He hated every form of humbug and deceit. His denunciations were never abusive, but they had a sting in them which left its effect.

How he loved books, and with what joy he showed me a first edition or a rare copy! It is very regrettable that he did not live long enough to complete the wonderful catalogue he commenced.

Osler's career always reminded me of Laennec, who was first a pathologist and afterwards became a noted clinical teacher.

As I said above, his departure from Canada to the States was a great loss not only to McGill, but to the whole country. He was beloved by all. Dr. George Ross and myself were on more intimate terms with him than others and many journeys we took together to New York and Boston and to the woods in Autumn. When he left these intimate relations continued, for we often visited him and he us. The first break in this tripartite friendship was when Dr. Ross died in 1892, aged 47. He was a most able man and the most acute and accurate diagnostician I ever met, and had much influence over Osler.

When Osler went to England I saw less of him, though when we met we renewed our old intimate relations, and we always corresponded freely. He was the soul of hospitality, as all Americans and Canadians who visited England know. He was never weary when entertaining his friends.

The last letter I received from him was written on his sick-bed, three weeks before he died. Shortly after his death I received from Lady Osler a note containing the following words which she told me he had inscribed on a slip of paper during the last weeks of his life:

"The harbour is almost reached, after a splendid voyage, with such companions all the way, and my boy awaiting me."

These words indicate his spirit of invincible optimism. We have lost not only a great physician but a great man.

OSLER'S EARLY WORK FOR CANADIAN SCIENTIFIC SOCIETIES AND AS A TEACHER IN MONTREAL

A. D. Blackader, M.D.

Montreal

MUCH already has been written of the stimulating influence which Osler exerted upon medical thought and activity during those early years of professorial work in Montreal, Philadelphia and Baltimore. In the short space allotted to me I propose to speak only of his early work in Montreal, after his return to that city in 1874 to commence his life work among the many friends he had made in his student days. Few physicians have begun their professional career with a larger fund of energy, natural ability and acquired knowledge, or with more perfectly trained powers of careful, critical observation. Like many of the great masters of the past, after a brilliant graduation from the halls of his Alma Mater, he travelled far as considered in those days, and spent many months under the illustrious teachers of whom London, Edinburgh, Berlin, Vienna and Paris could then boast. A few weeks only elapsed after his return to Montreal before his former professors offered him the Chair of the Institutes of Medicine, which had shortly before become vacant through the resignation of Professor Joseph Morley Drake. He accepted the position with diffidence; "he had hoped only for a demonstratorship"; but he brought to bear upon his new duties a great capacity for hard work, and a large store of the latest additions to our knowledge in physiology and pathology, acquired under the teaching of Burdon Sanderson and Virchow.

Although didactic lectures were always irksome to him, his course became such a delightful revelation of new truths to his students that no one ever voluntarily failed in his attendance on them. To the students individually, he became an inspiration. He ever emphasized the high ideals of the profession which they

had chosen and insisted on the importance of a regular plan for the day's work, and the necessity of concentrating on each special task and completing it. Osler spoke quietly, but very impressively; his language was concise and clearly arranged. His strong character was always an influence on the side of gentleness, courtesy and straightforwardness.

McGill was fortunate, at that time, in the number of brilliant young men associated as teachers in the Medical Faculty. Ross, Roddick, Shepherd, MacDonnell, Buller and Gardner: all of them had passed with high marks in their graduation examination and many of them had very recently returned from post graduate studies overseas. Osler had a stimulating influence on all, and owing chiefly to his efforts the Medico-Chirurgical Society of Montreal, which had been resuscitated a few years previously, became an active society with regular meetings and a full attendance of members. His demonstrations of pathological specimens, obtained not only from the post mortem room of the General Hospital, but also from long distances in the country, were always made interesting to the members by the lucidity with which they were demonstrated and were always accompanied by an exposition of the most advanced work of the day. Reports of many of these demonstrations appeared in the medical journals of Philadelphia and New York. At its meetings Osler also frequently presented papers embodying the result of his keen observation on the unusual and the abnormal. His remarks on the papers of other members were always courteous and stimulating, and very appreciative of good careful work. Almost all the specimens referred to in his Gulstonian Lectures on Ulcerative Endocarditis before the Royal College of Physicians in London, had been previously demonstrated to the members of this Montreal society. A large number also of the cases referred to in his "Practice of Medicine" were shown at the meetings of the society, and are at present in the Medical Museum of McGill University.

In 1875 he was appointed physician to the smallpox hospital in Montreal and in the following year contributed several important papers "On the Initial Rashes of Smallpox", and "On the Haemorrhagic Rashes of Smallpox", which were first read before the Medico-Chirurgical Society, and subsequently appeared in the Canada Medical and Surgical Journal.

Osler had been strongly impressed, while in Berlin, by the

pathological demonstrations given by Virchow, and during the Session of 1877 he commenced a demonstration course in pathology, modelled after that of his former teacher. The course was optional and had not at that date been included in the curriculum. It was nominally for his class in physiology, but many senior students attended his demonstrations to take advantage of an opportunity that had been lacking in former years. These classes met for an hour on Saturday mornings in his lecture room in the college. He selected three or four out of his class to perform the autopsies during the week in the Montreal General Hospital; from these autopsies he chose a certain number of specimens for the Saturday clinic. Before the hour of meeting the specimens were all arranged on separate trays and carefully labelled. When the class met, each specimen in turn was carefully discussed and all important points were clearly indicated. All the facts elicited were carefully correlated with the clinical history and notes of the case as taken in the wards. The whole demonstration was most informal and conversational. In order that his teaching should be of the greatest value to those in attendance, every student was furnished with a written description of each specimen and with an epitome of the remarks that he had prepared. There were always four, and at times eight, pages of large letter size, written by himself and copied by means of a copying machine. From thirty to forty copies were required each Saturday so that the demand such a task made on his time must have been heavy.

As further evidence of his capacity for work and his great desire to benefit the student, his effort in the spring of 1877 to establish and maintain a medical society among the under graduates, must be recalled. Its object, as defined by himself in speaking to the students at their first meeting, was to afford to every student an opportunity, which after graduation can rarely be obtained, of learning how to prepare papers, and to express ideas correctly. He hoped also "that the meetings would afford a certain amount of training in the difficult science of debate". The officers were to be undergraduates and the whole proceedings were to be in the hands of the members. Osler, however, never missed a meeting; he joined in all discussions and generally closed each meeting with a general review in which he combined criticisms and suggestions. A literary character was often imparted to the meetings by the reading of short selections from notable authors.

Osler had a keen ambition to take part in the clinical teaching in the wards of the hospital, and when in 1878 a vacancy in the hospital staff occurred, he at once applied for it. After his election to the post he immediately sailed, in company with Dr. George Ross, for London where he quickly passed the necessary examinations to qualify for the membership of the College of Physicians of London and then spent several months studying the clinical methods of Charles Murchison at St. Thomas's, Frederick Roberts at University College, and William Gee at St. Bartholomew's.

At the opening of the Session in 1879 the Faculty provided, at his urgent request, the means for the practical teaching of physiology by the establishment of a physiological laboratory. Here for the next five years he worked steadily, teaching physiology and pathology, during the winter sessions, and clinical medicine in the summer months. Those who were instructed by him will long remember the concise but very clear way in which he presented the outlines and important details of each subject, but left much for the student to study himself, telling him how, and where, to study to find more details and to complete the picture. Throughout all his courses of lectures, didactic and clinical, he made it his aim to stimulate the student to find out truths for himself by using his own powers of observation, and by directing him how to carry out some personal research work. "Try and find it out for yourself, then come to me and I will tell you if you are right", was a frequent advice. Work was his master word. From student and assistant he always demanded some research work, and each one felt that a task given by Osler was not only a training but a test of ability and of methods of work. His call was for regularity and system in each day's task. "When the day's activities are properly divided and rightly balanced, work is not work, but pleasure". Still further, in his lectures at the bedside, accuracy of observation, precision in statements and care in drawing conclusions were emphasized by word and by example.

Onerous and time-engrossing as was his work, in connection with his lectures in the College, and in the General Hospital, he found time to associate himself with the important Veterinary School of Medicine at that time connected with McGill University and to carry on lectures and important research work in its pathological laboratory where Dr. Duncan McEachran as Dean placed all available material at his disposal. He also took a keen

interest in the Natural History Society and in the Microscopical Club of Montreal. At the meetings of both he was a regular attendant and a frequent contributor. He was also an active member of the Editorial Board of the Canada Medical & Surgical Journal, contributing many of its important papers and editorials and adding greatly to the interest and pleasure of its monthly board meetings.

On looking back over the ten years spent in Montreal associated with all its medical, and many of its scientific, activities, we recognize with deep appreciation the great stimulus that all received from his active and brilliant mind and the inspiration for good which all experienced who came in contact with him. This stimulus was all the more powerful, because of his unselfish, frank and magnetic character, and of his always courteous and gentle manner.

His reputation as an inspiring, keen and successful teacher, his attractive personality and his enthusiasm for hard work became known and appreciated far beyond Montreal, and on the death of William Pepper, he was offered the Chair of Clinical Medicine in the University of Pennsylvania. After consultation with his *confrères* in Montreal, he accepted the offer, and left Montreal a rich man not in worldly goods, for such, as he said to friends on leaving "I have the misfortune, or the good fortune, lightly to esteem, but rich in the goods which neither moth nor rust are able to corrupt, friendship, goodfellowship, wider experience and fuller knowledge."

PERSONAL REMINISCENCES OF THE EARLIER YEARS OF SIR WILLIAM OSLER*

Edmund J. A. Rogers, M.D.

Denver, Colorado

I FIRST knew William Osler in 1866, when, of my own motion, I was allowed to leave a school where scholarship was held high, but where the manly qualities which lead to higher character formation were very defective, to enter Trinity College school, at Weston, near Toronto. The school was then not large, so all of the boys knew each other well. Here I at once discovered that the atmosphere and general tone was of the most elevated character. A spirit of the highest refinement, culture and straightforward manliness prevailed everywhere, both in school and in the general life of all.

It was easily recognized that this elevated tone was due to the influence and example of a small group of older boys, and, of these, Osler, then seventeen, stood markedly the leader. His personality was so strong that his influence extended to every department, and his consistent high qualities were such that in every scope of activity he was recognized without bitterness or jealousy of any kind, as the head. This applies not alone to scholarship and sports of every kind, but his strong independence and clear, positive character stood out in everything. I do not think his elevating influence in the school can be exaggerated, and it was such that when he went on from school to college the effect of his personality remained and was unquestionably a strong element in giving character to the school for many years.

While at Weston, Osler, with many other boys, lived in the residence of the founder and warden of the school, the Rev. W. A. Johnson. Father Johnson was a high church Anglican clergyman of the broad type. He was interested in all the activities of nature, and with him Osler investigated the pools and woods in the study of many phenomena of life.

Osler continued his studies in Toronto until 1870, when he

*Extracted by permission from an address delivered before the Medical History Section of the Medical Society of the City and County of Denver on January 28th, and March 2nd, 1920. *Colorado Med.*, 1920, xvii, 88-95.

transferred his studentship to McGill College, Montreal. Here his devotion was given to Dr. Palmer Howard, who held the chair of medicine in McGill. Dr. Howard was the impersonation of the dignified, conscientious, old-school, family physician. His devoted friendship and great admiration for his brilliant student were unqualified. At this time Osler was a consistent devotee of the ritualistic school of the Anglican church, one of the robust, straightforward, manly type, whose deep religion influenced at all times every phase of his life.

While a student in Montreal, as in every other period of his life, Osler succeeded in establishing the strongest friendships with those about him through his genial companionability, and his wonderful faculty for hard work and the constant acquisition of knowledge. He graduated from McGill in 1872 and, at once crossed the Atlantic for two years' hard work, chiefly in physiology and pathology in London, Berlin and Vienna. The European medical worker for whom Osler developed the greatest sense of admiration was Virchow[1], then preeminently the leader in Berlin. He gained an immeasurable admiration for the German methods of medical teaching, and then and there he formed the determination that he would become a great clinical teacher.

The early years of the seventies were momentous in the philosophical as well as the medical history of the world. Darwin's work had opened a new point of view to those who contemplated the meaning of life. Tyndall's celebrated address[2], which affected everyone, was given in Belfast in '74, and Huxley was leading, by his numerous articles, the debate as to whether man's personality was confined to pure automatism. Osler was undoubtedly influenced in the environment of these discussions, but I do not believe that in his innermost mind he ever lost the reality of the spiritual aspects of the religion of his early days. No man ever led a more purely straightforward, spiritual life. In all his actions and in all his dealings the one ruling axiom throughout his life was the Golden Rule, and to it he consistently held in his relations with every man.

Osler returned to Montreal in 1874, and although only twenty-five—still a boy in the opinion of the conservative community in which he had grown up—he was almost at once inaugurated into

[1] "Rudolf Virchow, the Man and the Student." *Boston Med. and Surg. Jour.*, 1891, XXV, 425.

[2] Presidential Address, British Association, Belfast.

the McGill professorship of the Institutes of Medicine. As in the University of Edinburgh, this Department consisted of physiology and pathology jointly, so that it fell to his lot to teach both of these subjects. The rule of the Montreal General Hospital was that an autopsy should be held upon the body of each patient dying in the institution, and the work of pathologist to the hospital came to him with that of the professorship in the college.

No more definite indication of the strong force of this independent, progressive, young man's personality can be noted than the fact that he came at once to be the directing influence of the faculty of the medical college, made up of men much his seniors; not that he was assertive of his opinions above those of others, but all that he suggested was so reasonable and so well digested and worked out that it was at once adopted by all as the wisest course to follow. Osler was always a reformer, but his reforms were brought about through evolutionary processes, not through revolution. He soon became the secretary of the faculty and the Registrar of the college.

Fully established in these offices I found him when on October 1, 1877, I entered McGill College Medical School.

Owing to the opinion held by my friends, supported by their medical advisers, that I was doomed to die from inherited tuberculosis before I was twenty, I was taken from school before my final year was completed and turned out into the open air life of the lakes and forests of the north and the plains and mountains of the west. In 1877, tiring of this necessarily desultory life I determined to study medicine and selected McGill as my school. I had scarcely heard of Osler during the intervening ten years. Arriving at the college on the opening day, I found the first formality was an address to the registrants by some member of the faculty. I was surprised and pleased to find that Osler was the one selected to perform this function.[3]

Dr. Councilman[4], speaks of this as perhaps the first of Osler's more brilliant Addresses. His delivery of it in his beautiful style, and his magnetic personality gave meaning, persuasiveness and force far beyond that which could be conveyed by any language.

---

3 *Canada Med. and Surg. Jour.*, 1877-8, Vol. 1, 193-210.

4 "Some of the Early Medical Work of Sir William Osler." By W. T. Councilman. *Johns Hopkins Hospital Bulletin*, July, 1919, pp. 193-197 See also p. 33 of "Tributes."

He congratulated us upon our choice of a life calling; told us of its arduous, constant work, and of the self-sacrifice and devotion it demanded; said it was above all occupations because its work was one solely for the benefit and advancement of humanity, and was so beyond all selfishness; that it offered none of the honours and emoluments of other professions, and that its only reward would be in the satisfaction of conscientious, useful work well done. He advised that each day's work should be sufficient in itself, and that no fear of difficulty or desire for the future should disturb the equanimity and joy of that day. Constant, concentrated work was the key to success. Science and the humanities should be all sufficient. Indeed, his ideal made the life almost that of an ascetic.

His presentation of the duties and difficulties of this, to me, prospective new life impressed me deeply; I doubted if I could attain the standards that he expounded, but it was too late to escape; I was there to register, and I proceeded to do so. When, in turn, I came before him, and gave my name, he at once recognized me. Had I been a long-lost brother, I could not have received a more gratifying welcome. He was never demonstrative or effusive, but there was feeling and meaning in all that he did or said. As soon as he was free I must walk with him to the hospital, and as we went he asked me of the past years and held out every encouragement and alluring promise for the future. I was taking a step I would never regret; I was doing that which would make my life worth while in every way.

The hospital meant an autopsy, and I soon found myself for the first time in the presence of a cadaver. I had watched the advancing steps of the Virchow technique with a mixture of resolute curiosity and suppressed horror, the general inspection, the long incision, the organs removed one by one. Then, lifting the released intestines *en masse*, he suddenly turned to the group of students, back of whom I stood, and said: "Rogers, you prepare these for inspection'" Can you imagine my embarrassment and emotion? But I succeeded, with the advice of senior students, in passing the ordeal.

This was a typical Oslerian act. Superficially, it seemed all dry humour, the sort of practical joke for which he was celebrated, but in reality it was an initiatory test. The questions in his mind were "What ability has this man to meet an unexpected and

unusual situation?" "What capacity for work has he?"

Work was to Osler[5] the master word of progress and success. If a man were not ready and willing to face work with courage and equanimity, he was only a useless clod in the profession. Consequently the giving of any kind of useful work was his greatest test as well as the greatest boon he could offer any student. These demands for work were expected and often dreaded by the students who came near him. He always had a group working for him, and it was often a disappointment to one to find that the work had been given, not because it was needed for some purpose, but simply was work for work's sake; however, the doing of it was always a beneficial experience for the worker.

Leaving the hospital we walked back to his rooms, which I was told were from that time on to be my headquarters. He was then living with Dr. Buller on St. Catherine Street in the ordinarily built-in city house with a front and back room on each of three floors, the back parlor on the first floor being Buller's consulting room, the front room a waiting room, used in the morning as a breakfast room. The second floor front room was Osler's consulting room, library and office; the other rooms were used as bedrooms. Osler said that I was to become the third member of the family. Buller acted more deliberately, and it was some little time before these latter rooms were rearranged and I was given the third floor front as my bedroom and study. Here, until I left Montreal after my graduation, I lived all through my studentship.

Osler never did anything by halves. From those who were willing and ready to work with him his demands were unlimited, but for this he more than repaid in the opportunities and good fellowship that he returned. I thus had every opportunity for the most intimate knowledge of all his mental and physical activities. Soon I found that through his whole-heartedness his friends had become my friends, but not, of course, through any virtue of mine; his pleasures and joys he shared with all those about him, talking freely of all that he had on hand, for in his ebullient enthusiasm he was still a school boy. In his course of life he was more regular and systematic than words can say; in fact, it was hardly necessary, living in the house with him, to have a timepiece of one's own. One could tell the time exactly from his

[5]Æquanimitas. 2nd Edition, p. 363.

movements from the hour of his rising at seven-thirty until he turned out his light at eleven o'clock. His cheerfulness and equanimity were surprising. He never lost an opportunity of saying a word of cheerful encouragement. Nothing ruffled his wonderful good temper.

We three had breakfast together at eight o'clock. The only impatience I can recollect his ever showing was when the housekeeper was a little tardy in putting our breakfast on the table. During breakfast Osler allowed himself leisure to glance over the morning paper, and in doing this he noted and remembered all important events going on in the world. Nine o'clock found him sitting down at his desk in his work room. His favourite working place all through his life was his library table. In his tastes and instincts he was essentially literary, and he always had a day's work laid out before the day began. Hours for meals, hours for recreation, hours for every duty were kept with absolute rigidity. He was always deliberate in every movement, never rushing, never hesitating. One of his constant principles was that each day should be complete and sufficient within itself.

At 10 o'clock p.m. exactly he went to bed, and the hour from ten to eleven every night was devoted to the reading of non-medical classics. He never read light literature, and his favourite books were few but were thoroughly studied. He gives a list of what he calls his "bedside library" on the last page of the later editions of *Æquanimitas*, and these were the books that he always liked near him. In his early days the *Religio Medici*[6] was his constant companion, and from the diligence with which he read and re-read it, he must almost have known it by heart. In his address on Sir Thomas Browne[7] he speaks lovingly of its influence on his life. This hour with the great writers undoubtedly was the main impulse to his great literary attainments.

At this time Osler had no private practice and had no desire for any. An occasional case seen in consultation gave him ample material for investigation, and when he saw something that he did not understand his rule was to study that condition thoroughly and, usually, to write a paper upon it, and such papers have generally become the classic on the subject.

---

[6] "*Religio Medici*." An address delivered at Chiswick. *Guy's Hospital Repts.*, October, 1905. Published, London Press.

[7] An Address on Sir Thomas Browne, delivered at the Physical Society, Guy's Hospital, October 12, *B.M.J.*, 1905, Vol. 11, pp. 993-998.

I became, of course, very familiar with Osler's work in the dead-house; indeed, here I was soon installed as his assistant. During my second year, the hospital was unable to publish a report, so Osler made a selection of important cases and copied them all by hand himself, mimeographed them on the instrumens that was the progenitor of that now in use, and had the few copiet that he made bound in book form. These few copies will now each be of value to his admirers.

His great ambition from the first was, naturally, an appointment on the staff of the hospital. These positions were not easily obtained and there was great competition for each vacancy, especially among men older than he. In 1878, however, a vacancy occurred, and every possible interest that could be roused was brought to bear. As usual his desire was fulfilled. Immediately he started for Europe and put in the summer drilling in the hospitals where he could derive the most benefit.

At this time, though a very careful clinical student, he was almost a nihilist in therapeutics. One of his favourite axioms was that in the last hundred years no one had done the good in the practice of medicine that had been done by Hahnemann. This, he would explain, was not due to any scientific theory or important truth that Hahnemann had advanced, but that, by the application of his methods, it had been demonstrated to the medical profession that the natural tendency of disease was towards recovery, and that the best results were usually achieved if the patient were decently cared for and properly nursed. He believed that too much medicine was still being used, and that overtreatment was the medical fault of the day.

When, therefore, his time came to take charge of a section of the hospital older doctors looked on with bated breath, expecting disastrous consequences. He began by clearing up his ward completely. All the unnecessary semblances of sickness and treatment were removed; it was turned from a sick room into a bright, cheerful room of repose. Then he started in with his patients. Very little medicine was given. To the astonishment of everyone, the chronic beds, instead of being emptied by disaster were emptied rapidly through recovery; under his stimulating and encouraging influence, the old cases nearly all disappeared, the new cases stayed but a short time. The revolution was wonderful. It was one of the most forceful lessons in treatment that had ever been

demonstrated. Dr. Thomas McCrae in his article on "Osler and Patient,"[8] says: "It has been said by some that Sir William Osler was not particularly interested in psychotherapy, but one might say that he did not need to be; he practiced it, not always consciously, perhaps, but always effectively."

In the analysis of his character one is first of all impressed by the perfect balance and equilibrium between all sides of his nature. I have never, I think, known a man who had such absolute self-control. His great gentleness and humanitarian qualities, his love for children and the society of refined women, and his extraordinary equanimity were characteristics known to all his friends.

Briefly summarizing, we may say that the amount of work that Osler produced was immense; most versatile; always good; always brilliant, and much of it highly scientific. In scientific medicine he was one of the many who took part in the great advance of the past fifty years, no one of whom stands individually preeminent. But in the educational, sociological and cultural fields, he stands preeminently alone, a solitary genius.

No one can measure the degree to which our educational and ethical standards have been advanced under his influence. Every member of the profession has been directly or indirectly affected by his consistently held and boldly advanced principles. Every medical student during each day of his school career receives a better course because of the standards and mode of instruction that Osler has taught us.

To have known him well is a constant, unfailing inspiration. There was no other side to his character. The more intimately one came to know him, the deeper one found the genuineness of his unfathomed manhood.

You can, then, well appreciate my point of view when I say that, apart from my immediate family affairs, the remembrance of him occupies the most revered place among my memories of the past, and that, to me, all that pertains to him seems almost sacred.

---

[8] "Osler and Patient. By Thomas McCrae. *Johns Hopkins Hospital Bulletin*, 1919, p. 202. See also p. 55 of "Tributes."

RECOLLECTIONS OF SIR WILLIAM OSLER

MARIAN OSBORNE

Ottawa

WHEN it was decided, in the year 1871, that William Osler should reside in Montreal, it was arranged that he should live in the home of my mother, who was the daughter of the English surgeon, Edward Osler, an elder brother of the father of William.

My recollections of the young man, as he was then, are among the earliest of my life. They are of a man whose cognomen was, in those days, simply Bill Osler. The down was just coming on his lip; he had flashing dark eyes, a clear olive skin and a vivid laugh. He adored children and they were always fascinated by him. My brothers and I used to watch for him to come home from his lectures. He always came down the street at a swinging pace with the spring on the ball of the foot, which he kept till the day of his last illness. He entered the house with a cheerful whistle; that was the signal for clapping hands of joy from the children as the principal actor entered the dining room. "O, the darlings," he would call out gaily and wave to us in greeting. Then he would put his hands lightly on the dining room table and vault across its width. To us it seemed a marvellous feat. He was the Fairy Prince who could be depended upon to appear at the right moment and save us from the consequences of our misdeeds and abate the wrath of the Olympians.

"Uncle Bill" was made a professor at McGill University when he was twenty-three, and he was called by the students, who idolized him,—"The Baby Professor." He was younger than many of those whom he taught but he never seemed to have any difficulties with discipline. He was not a disciplinarian with anyone but himself, and his rule for others was the rule of love and understanding. While the students were waiting for their lectures, they used to sing their College songs. Some of the Professors would walk into the room with a frown and say, "Silence, Gentlemen," as though they had been insulted, but the "Baby Professor" would wait till the song was ended and then come in smiling with a jest or word of approval. How thrilled I used to be

when the students came at night and sang their songs to serenade him. No cavalier that stringed his adoration to his lady love could have awakened more rapture in her breast than those college songs, shouted with hoarse delight, did in mine.

When Uncle Bill first had to lecture it was a great difficulty to him, and my mother spent many hours in practise with him that he might train and pitch his voice so that it could be heard. He had trouble, too, in preparing his lectures and my Aunt, Miss Jeannette Osler, who lived with us, used to proof-read them with him and help him towards a literary style. It is typical of the man whose "Master-word" was "Work" that he strove until he had overcome his lack of elocution, his shyness and Osler reserve, and had attained a masterly simplicity of style in writing.

One day we were walking down the street together. He found it difficult to walk in the accepted sense of the term, his nature seemed too buoyant to allow him to place one foot in front of the other as is done by more humdrum individuals. He would dance along humming or whistling. His was the true *joie de vivre*, which never left him in spite of work and sorrow and years. On this day we were dancing along St. Catherine Street hand in hand, when an old and very seedy-looking man accosted us and asked for money. Uncle Bill looked at him with his penetrating brown eyes and then said with a laugh—"You old rascal, why should I give you money to drink yourself to death?"

"Well, Sir, you see it lightens the road going."

"There is only one thing of value about you and that is your hob-nailed liver."

"I'll give it to you, Sir, I'll give it to you."

Dr. Osler laughed and putting his hand in his pocket drew out some silver which he gave to the old man, saying—"Now, Jehosaphat, promise me you will get some soup before you start in on the gin." The old fellow eagerly agreed and went away with infirmity in his step. The Doctor looked after him with a thoughtful expression. "Pretty cold for that poor old fellow," he murmured, and then I found that we were running after the beggar.

"Here, take this, I have a father of my own," said the Doctor, pulling off his overcoat and putting it on the astonished old man. "You may drink yourself to death, and undoubtedly will, but I cannot let you freeze to death."

"Tell me your name, Sir."

"William Osler, and don't forget to leave me that liver." With a wave of the hand we continued on our dancing way. Virtue was rewarded; two weeks later the old man, before he died in the hospital, made his last will and testament, leaving his "hob-nailed liver and his overcoat to his good friend William Osler." It was as well, for his "good friend" would have had to save for many moons before he could have got the wherewithal to buy another coat, and, after it was thoroughly disinfected, it was as good as new.

Sir William was always a book-lover and his favourite was ever in his pocket ready to be drawn out and read when opportunity offered. In those days, the first I remember was Tennyson's, *In Memoriam.* Then came Keats' *Endymion;* Montaigne's *Essays, The Anatomy of Melancholy,* the plays of Shakespeare and Arnold's *Light of Asia.* I never saw him idle or sleeping in the day-time, or sitting staring into space. The day always seemed too short for him to accomplish all he desired even with his boundless energy and his system of work.

On one occasion I was trotting with him through a ward in the Montreal General Hospital. There was an old Scotch woman there making "a devil of a row," as one of the doctors expressed it, because she had to go under an operation. She was rocking to and fro in an agony of grief and lifting up her hands and voice in despair to Heaven. Dr. Osler went over to her kindly and patted her shoulder. "Poor old Scotch body," he said kindly. "Thole it a bit, thole it a bit." She turned to him and clasped his hands in hers, smiling through her tears. "O, Sir," she cried, "I haven't heard sic a talk since I parted frae Edinboro—Bless you, I maun try to stop frae greeting and grizzling." He talked to her for a few moments and left her calm and resigned. He used to say to his students, "Never forget the rights of patients" and he tried to instil sympathy and tenderness for the poor under their care. The Children's ward watched for him as Launcelot did for the Lily Maid. They would "listen for his coming and regret his parting step." Many a time have I walked down the street with him and seen the children rush out to greet him and bring him their sick dolls to mend. He was never in too much of a hurry to stop and have a kind word and a joke ere he danced away. Even then they would follow as fast as their little legs

allowed, and he would turn and throw them kisses with both hands as he went backwards down the street.

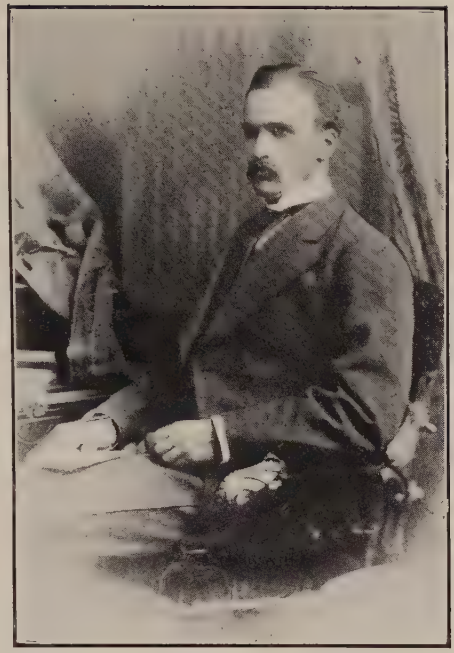
I once said,—"Hurry, Hurry, we shall be late." "Hurry? never hurry—hurry is the devil. More people killed by hurry than by disease."

One day we went to pay a professional call. I waited outside and noticed that his face was grave and that he did not spring up the steps as usual two at a time. When he came out his face was still more grave and sad. "Is she very ill?" I asked timidly slipping my hand into his. He shook his head "Very ill—I fear she is like to die." I was in the depths of despair. To my surprise he suddenly regained his cheerful step and began to whistle. We smiled at each other and the clouds seemed to have rolled away from the sky.

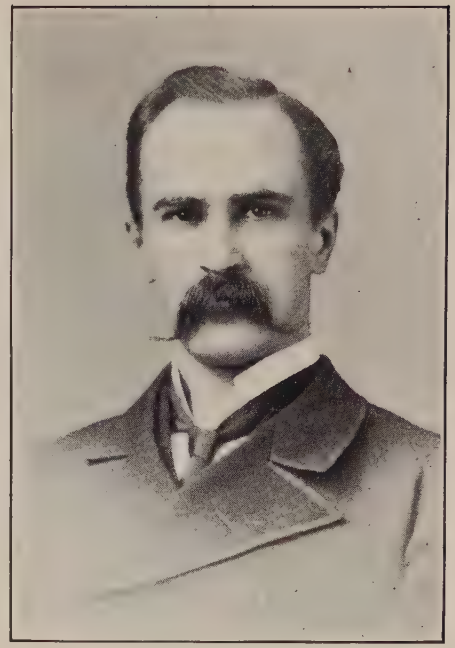
"Why do you whistle?" He made a grimace as though he were smiling at himself and answered with sadness, "I whistle that I may not weep."

This was part of his philosophy.

My intimate association with him as guide, philosopher and friend from earliest years until his death leads me to the belief that he was of all men the most Christ-like in his life and the most God-like in his attributes.



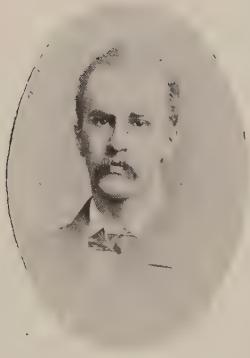
Osler as a Student at McGill, 1871



Osler in 1881

1

2



3

4

WILLIAM OSLER—Early Portraits

(1) As a youth at Trinity College.
(2) In his early student days at McGill University.
(3) In his post-graduate course. Photograph made in London.
(4) The "Baby Professor" at McGill University.

Student Reminiscences—Montreal Period

EDITORIAL NOTE.—The following contributions were received in response to a letter addressed by the Editor to graduates from McGill University in the period of Dr. Osler's professoriate (1874-1884), requesting reminiscences of their student days with or under him. Several other replies were received which it has been impossible to publish owing to overlapping of material and lack of space. All these contributions are gratefully acknowledged.

* * *

*I GLADLY acquiesce in the invitation to contribute any personal reminiscences that may occur to me as a result of my associations with the late Sir William Osler as a fellow student at McGill during 1869 to 1872 and the years immediately following, and I deem it a great pleasure and privilege to be able to add my mite to the numerous pages which have already appeared in its published volumes devoted to "In Memoriam" tributes by scores of authors from world wide centres who were friends, acquaintances or associates. From the pens of those who knew him best have come the most eulogistic sentiments of appreciation of his noble character and accomplishments as his career in medicine is traced from college days at McGill to the time when the zenith of his fame was reached in England and he was knighted and had a Baronetcy conferred upon him by the King.

At the recent Reunion celebration of the 105th anniversary of the founding of McGill, over 1,600 graduates assembled at the great banquet held at the Mount Royal Hotel. Tables were arranged so that as far as possible graduates of the same year would be seated together. The preponderance of youth and middle age was particularly manifest. I found my seat at the table reserved for the oldest graduates, only five places were occupied, and I the only representative of the class which registered in 1869, and which Osler joined from Toronto in 1871. Of the forty who entered that year only six are now living, Professor F. J. Shepherd of Montreal, Surgeon-General Carmichael, U.S. Navy, Dr. F. Jackson of Brockville, Dr. Chevalier of Iberville, Dr. Farley of Belleville, and myself. I realized sadly that most of my classmates had crossed the river.

As I remember Osler in college days he was of medium height, of dark complexion, well proportioned physically, agile and vigorous, comely features, dark brown eyes, and wore the drooping moustache which he did not discard through later life. While one of the most devoted of our class to studies and college duties he was fond of and took part in the university games and sports. Football matches between medicine and arts were a yearly occurrence. Osler was always a member of our medical team. The game then was started by placing the ball in the centre of the field, and one from each team at a signal ran for the first kick. Our team always chose Osler and, moreover, he always reached the ball first.

Many students at this period graduated in three years instead of four, the general requirement. A year at college was saved if a certificate of study with a general practitioner could be obtained. They would then go up for the primary and final examinations together, at the end of the third year. Osler had already had two years of medical study in Toronto when he entered our class in 1870 and had, therefore,

*Received for publication in Second Impression, Nov. 6th, 1926.

graduated a year before the rest of the class, passing his primary and finals together, in 1872. The honour list of the primary examination was in order of merit:—F. J. Shepherd (prize man), A. O. Alguire, J. Hils, D. A. Carmichael, J. B. McConnell, W. Ward, E. A. Kittson, W. Osler; and in the finals honour list Hamilton Allan (Holmes Medallist), G. A. Stark (final prize), W. Osler, A. A. Browne, Waugh, Marceau, Hebert, Pegg and Morison; so he stood third in the finals, but last in order of merit in the primary honours lists. While these results were not especially prominent, a number of personally prepared pathological specimens which accompanied his thesis gave the first chief indication that a medical genius of universal progressiveness had appeared on the horizon, and this was more than confirmed when, within a couple of years, we learned that the Faculty had recognized his wonderful ability and promising future and appointed him Lecturer, and the following year Professor, of the Institutes of Medicine. He was soon recognized here as an authority in medicine and was constantly called in consultation by *confrères* who had hitherto worshipped only at the altars of the professorial staff whose advice had been considered the only source of help available.

I may mention one instance in my early practice as typical of how his early stay in Montreal was such a boon and how his advanced knowledge of many subjects which had not been alluded to in our college course was taken advantage of and problems solved for those of us who were in general practice.

A patient from the district known as Griffintown consulted me about an abnormal condition of the urine, which resembled curdled milk. The specimen was to me unique and I had not any knowledge of such abnormality. I brought a sample to Dr. Osler, who at once diagnosed the case as one of chyluria and became very much interested. He suggested that it would be necessary to visit her about midnight. It was then I first learned that a parasite, the Filaria, was usually associated with the condition, and was only to be found in a midnight specimen of blood. So, one dark night about 2 a.m., we trudged down the dimly lighted streets to this crowded locality, entered a back yard, climbed two flights of stairs to a labourer's humble flat, to find the young French mother awaiting us. The samples of blood obtained after prolonged careful examination were negative as to the presence of the parasite. His interest, however, did not cease there and later, after the patient's death with tuberculosis, he expressed a wish for a post mortem, permission for which was with difficulty obtained. Samples were taken from the various internal organs, with their contained blood as far as possible, and finally the thoracic duct dissected out, and these all again subjected to microscopical examination, the results being again negative.

This case is representative of the work he did for us then and which was done usually for the love of the work and it was always marked by detailed thoroughness.

In this way the cases investigated resulted in added increments of sure knowledge of disease processes, records of which became the basis of the interesting and instructive papers and demonstrations which were so profitable and so much appreciated by members of the Montreal Medico-Chirurgical Society. Few whose privilege it was at that time to be members seldom failed to be in attendance when Osler's name was on the programme. The accumulation of this material from

his hospital, among practitioners, and from his private practice, laid the foundation and became the elements of his popular practice of medicine and of his articles in that masterly encyclopedia of medicine—*Osler's Modern Medicine*. His phenomenal advance was viewed with astonishment and pride by his many friends and associates, as larger spheres strove for and obtained his outstanding abilities for their teaching staffs, and Montreal and McGill became the stepping stones to the wider scope offered by Philadelphia and later Johns Hopkins at Baltimore, and, finally to the seats of the mighty at Oxford.

Sir William's kind and affable disposition towards all who knew him which characterized him at college, continued through life to be a most prominent feature of his personality and his interest in the welfare and progress of his early friends remained keen. While he was at Johns Hopkins he came across a copy of the *Canada Medical Record*, of which I was editor at that time. He at once wrote a kind letter of congratulation and encouragement which I highly prized. During the war, meeting my daughter who was nurse in charge of the epileptic ward, he took a special interest in her and her work when he learned who she was.

It was a shock to the world when the death of Sir William Osler was announced in December, 1919, at the age of seventy, and in a condition of vigour that gave promise of many further years of usefulness, in which the benefit of his ripened experience might have been available for the further advance of medicine. Few physicians who have reached such a pinnacle of fame and eminence as did Sir William Osler, have, when their worldly activities ceased, been so widely and sincerely mourned. This becomes obvious when one perceives the fact that wherever he became known he was soon recognized as not only the authoritative master in medicine, but also a man with a winning personality which compelled admiration and respect and love. One experiences a feeling of pride in having been a classmate at the beginning of his almost unparalleled career and in having the privilege of placing on record a few incidents of this association.

J. B. McConnell (*M.D., 1873*)

Montreal, November 4, 1926.

* * *

AS one of the members of the class that took Osler's first course of lectures in the Medical Faculty of McGill University, I may say, to begin with, that he was always interesting.

Osler succeeded Morley Drake in the chair of the Institutes of Medicine in 1874. He spoke very quietly, deliberately and clearly. We soon realized that his lectures, although simple, his meaning always being evident, were at the same time thoroughly up to date and that we were getting the last word on each subject taken up. Although somewhat youthful in appearance when compared with others of our teachers, yet there was at once noticeable a loftiness and dignity of character associated with an ever present vein of humour. No member of the class missed one of Osler's lectures. They were entertaining as well as instructive. It may be said that we were prepared to give him a cordial welcome because we seemed to know him before he came to us as a teacher. While a student he had shown unusual interest in pathology. We had all seen the strips of intestine mounted on sheets of glass, illustrating typhoid ulcers, in

different stages up to the point of perforating, that were on view in the museum and which were used by Dr. Howard in his lectures on typhoid fever. Of course in those days there were no physiological laboratories, but his clearness of expression and the illustrations that he was able to provide gave us a very comprehensive grasp of the subject, together with an ambition to learn more.

Osler was a teacher, but he was more, he was an educator. He stimulated every one that came near him. He not only communicated facts but aroused an interest in the subject that he discussed. He left one not with the feeling that finality had been reached, but rather that there was much more to learn about it.

Osler organized the first class in histology in McGill. It was a voluntary class, held on Saturday afternoons in the cloak-room in the basement of the Medical building. I think that every member of the class of '77 joined. We were given bits of tissue which we imbedded in little paper boxes with wax. We made the paper boxes, poured in the paraffin, and then cut our own sections with a razor. We thought them very good, and indeed they served their purpose, and the keenest one among us was our teacher, who never failed to commend a particularly thin smooth section. After we became somewhat familiar with the normal tissues we were given abnormal tissues and we then laid the foundation of our knowledge of pathology. We did not regard this as work. It was made so interesting that our Saturday afternoons were looked to as a real half-holiday.

Osler was interested in medicine and made us feel that our work was to be applied later on in our hospital work. I cannot but think that Osler's teaching of the Institutes of Medicine was greatly enhanced by the fact that he was a keen student of clinical medicine. This became very evident in later years at the meetings of the Medico-Chirurgical Society. It is quite safe to say that no pathologist since Osler has made the exhibition of pathological specimens so attractive to the Society as did Osler. One may say he made it the feature of the evening. The members made a particular effort to come on time to hear Osler's talk on the specimens that he brought. His talks were short and very much to the point. He seemed to know intuitively about what and how much the members wanted and could appreciate.

His genius placed the pathological department of the Montreal General Hospital on a high plane. To-day his records of autopsies are models at once of brevity and completeness. He, however, did it under difficult and trying conditions. The luxurious housing and equipment of this department came after Osler left Montreal. He did the autopsies in an old outbuilding in which were a wooden table and a stove. In the winter it was only heated when required, and many a day I have made a fire in the little stove, that at the same time warmed the room more or less, often less, and heated the water. A wooden table, a bucket of warm water and a meagre supply of instruments in the Master's hands yielded results not to be surpassed at the present period. So keen was he in his search after truth that he was always willing to go to a private house and do an autopsy. In my earlier years of practice Osler did many autopsies for me in private houses, often among the poor when there was no fee for the attendant nor the pathologist, and yet he did it in such a way that one was made to feel that the compliment was paid to him, and that the interest in the findings more than repaid him for his trouble.

Osler always stimulated those with whom he came in contact, old and young. There are emanations from men as well as from radium. The emanations from Osler were pleasant, cheerful, optimistic and encouraging. One of his admirers said of himself what I think was universally true, that he never went into Osler's room that he did not come out with a cubit added to his stature.

He did a great deal in reorganizing the Medical Faculty of McGill, but the wonder is that he did it without offending anyone or making an enemy. This may be a gift. The secret I think was his great heart, his wonderful humanity. He loved his fellow men.

Montreal *Geo. E. Armstrong (M.D. 187?)*

THE truest test of the extent to which in old age events of early manhood make their imprint on memory is the distinctness or otherwise of the visual images one conjures up as he reflects on the occurrences and activities of a period long past. Judged by this evidence the relations of Osler to his students in the old Montreal General Hospital remain—or seem to remain—as if they were the happenings of yesterday. Of course, at the time we were but dimly conscious of the extraordinary powers—probably at that stage of his career only partially developed—of the remarkable instructor that had come among us. This promise or simulacrum of greatness was, I think, more evident in his course on practical pathology than in his didactic teachings, popular as the latter always were. Nor did his hospital "walks and talks," attractive and instructive as they also invariably were, impress most of us as particularly brilliant, because there was at McGill in those days, a cluster of truly great clinicians, among whom one may mention Palmer Howard, George Ross, F. J. Shepherd and Sir Thomas Roddick. He who surpassed these men must indeed be of giant stature! Consequently, I am impelled to believe that the outstanding triumph of the Chief's hospital career was his success in bringing home the truth, trite enough in these times, but not fully recognized forty years ago, that the post-mortem examination is not wholly an occasion for satisfying a lively curiosity as to the cause of death, not even done to settle a dispute between rival diagnosticians, but that it is in essence a necessary sequence in the report of a case that has had a fatal termination. To this end the student was encouraged—as only Osler could encourage him—to learn all that could possibly be known of the subject under consideration, living and dead. In this fertile field Osler displayed to the best advantage all his magnetic powers of persuasion and all the educational force that attend one fully conversant with his subject.

An aura of contagious enthusiasm seemed to surround this student's companion, and any work in which *he* took an interest appeared to be an inspiration to go and do likewise—if not exactly the same quality of work, as near it as possible.

Those of us who were lucky enough to hold Clinical Clerkships in the "General" during the Osler regime never failed to be present at those sections of which, so to speak, *pars magna fuerunt;* for were we not, in the autopsy room at least, regarded as something more than mere bystanders?—almost as equals in the medical valley of Jehoshaphat? Later—but surely not then—we realized that the consideration thus shown us by the Chief was not only the lure that drew all men to him, but that it

converted every graduate within his zone of influence into what an irreverent one called a "shouter for pathology."

All this was, of course, but a variant of the old story; every medical student of the Oslerian period at McGill was not merely *a* friend and confidant of the Chief; he was *the* particular friend and confidant.

And after all is said, that was the secret and mainspring of Osler's enduring influence over us and the principal reason why, for his sake, even the least of us tried "to live and love and do a little work."

Chicago *Casey A. Wood (M.D. 1877)*

MORE than forty-five years have elapsed since my first introduction to Osler. He was then the recently appointed Professor of Physiology in McGill University, and I was a first year student in the Faculty of Medicine. Although neither he nor I suspected it, the acquaintance begun at that time ripened into a close friendship which terminated only at his death.

Memories of so distant a period often lack definition, and moreover are liable to be moulded in some degree by later knowledge and experience, and also by greater intimacy between the individuals. Nevertheless in response to a request I venture to record briefly some of the recollections of my college days which centre around him, whom we students respected as "Professor Osler," and loved as "Billy Osler."

I remember with so much admiration almost all the Professors and Lecturers of the Medical Faculty of those days, that I am very reluctant to suggest comparisons between Osler and his colleagues. However, without any disparagement to the others, I can truthfully say that before I had completed more than a few months as a student I was conscious that there was something in Osler's teaching which rendered it unusually acceptable and attractive. It was certainly not any exceptional eloquence as a lecturer, for in my youthful estimation there were at least two of his colleagues with superior oratorical powers; moreover, I do not think it was solely his wonderful personality, though this undoubtedly influenced all his students. My belief is that gradually and almost unconsciously I became impressed by certain characteristics which illumined his teaching in those early days, and which shone even more brightly in later years. I allude to his obvious earnestness and sincerity, his love of truth, exemplified in lectures by a regard for accuracy of statement, his infectious enthusiasm, his keen desire to impart knowledge and to encourage his students to pursue it; also, though this may have been an impression of later date, his devotion to the scientific side of medicine.

While by no means unmindful of the dignity of his professional position, Osler was very approachable and evinced a desire to establish personal relations with every man in his class. Students who sought his advice or assistance could always obtain an interview and never came away empty-handed.

A final word concerning Osler as an examiner. I have had a rather extensive experience as an examiner in Montreal and London, and on two occasions I was associated with Osler as co-examiner. I can say unhesitatingly that I have never met a more ideal examiner. His examinations were thoroughly practical and very searching. He had no use for the tricky petty questions in which some examiners delight and his manner

was that of an interested questioner endeavouring to gain information. But he very quickly ascertained whether the examinee's knowledge was sound, or the superficial variety derived from cramming. I cannot imagine that any ill-equipped, but plausible candidate ever succeeded in deluding him.

London, England *J. B. Lawford (M.D. 1879)*

THE item in the Public Press, that the remains of Sir William Osler were cremated in London, gave me an additional pang. Not that I object to cremation, but that cremation so forcibly depicts the end of human life.

How we respected and loved Osler in my class of '79 at McGill! How he worked for the students and made them a part of himself! After graduating I was stranded in Montreal. My instincts assured me that the beloved Osler would help me out. "How much do you want?" "I want fifteen dollars." "Oh, that is not enough, here is twenty-five. Glad you came to tell me." And without even asking me for an I.O.U. he gave me a parting cheer. Such was the heart of Sir William Osler.

His memory of names was uncanny. Some twenty-five years later I called to see him in Baltimore. I rang the bell and just then the door opened,—Osler escorting two patients, Sisters of Charity. After bidding them farewell he gave me an enquiring look. I blurted out "Chisholm." "Oh, come in, Murdoch, I am so glad to see you, how are you getting on?"

Next day in the hospital-wards he could not do enough for me. Everything worth demonstrating he showed me. Among the rest was a case of Pulmonary Osteo-arthropathy. "Come, I want to show you something new." After his showing the case I said, "That is nothing new to me. I demonstrated this condition to my class five years ago." As if in doubt, he gravely asked, "What kind of a case was it?" "An old case of Empyema" I answered. His face relaxed and with a smile he said, "Oh, yes, those old suppurative conditions cause it." Then, "Did you report it?" I said "No." "Ah, you Eastern fellows hide your light under a bushel."

Since then I have had no personal relations with Osler. His memory is very dear to me. I bow to the inevitable with tears.

Halifax, N.S. *Murdoch Chisholm (M.D. 1879)*

FROM one August evening in 1880 when I first met Sir William Osler, until I left Montreal in June, 1882, with the coveted McGill Medical degree of M.D., C.M., we were in almost daily contact. He the persistent, incisive teacher, and I one of a class of pretty good medical students.

That first evening was impressive. He was working with a microscope with Ogden, a third year medical student. When I told him I was a Yankee from Connecticut, a graduate of Yale Academic, with tickets showing a full year's work at the Yale Medical School, and wished to finish my Medical course at McGill for business reasons, he took me in and received me cordially. We were soon at work at the microscope, and with a running fire of questions and general talk, the evening passed quickly and pleasantly.

It was Osler's plan to begin promptly at 12:30 on his autopsies, and I made it my plan to take a quick lunch and be there with him. If there

were two cadavers, he would set me to work to prepare one for inspection while he worked on the other. Then I would write, to his dictation, the finding in his record book. By that time, (about one o'clock), the other members of the class came in and circled around the table for his exposition.

There were six of us took a summer course (1881) in clinical medicine with Osler. Jerry Howard, son of Dean Howard, was one of the number. We had some wonderful sessions. He would take us to a case in the Hospital. We would take the history, make a physical examination, and then he would have each one of us write out our diagnosis with our reasons, and he would do the same. Several cases were checked up by autopsy.

We had a ripple of excitement in the winter of 1882. A murderer was hung in the prison in Montreal. A few of us final year students with Professor Osler were invited to the autopsy. This was at the time that Benedict had written on the brains of criminals. Osler wanted a hemisphere of that brain to study the convolutions. Howard, Ogden, Thornton and myself were in the field to get one. When the cadaver had been inspected Osler assisted the French pathologist who was doing the autopsy, to make a microscopic examination. In his inimitable way, he led the pathologist with the microscope to a better light. The crowd followed. That left us a clear field for the few seconds necessary to remove that hemisphere of the brain.

At this time Osler was of slender build, lithe in movement; he seemed never to tire. His control over the students was perfect. He was such a good fellow with the boys, that if anyone made a move to start something, a look was sufficient.

I had the pleasure of meeting him several times in after life. The last time was at New Haven when he was a guest of the Connecticut State Medical Society in 1913. I was disappointed at not meeting him in London at the Clinical Congress of Surgeons in July, 1914. He was on the programme to read a paper, but owing to some friction somewhere, he went to Scotland. Then came the war.

West Meriden, Conn. *Edward Wier Smith, F.A.C.S. (M.D. 1882)*

OSLER'S influence on the profession in Montreal and on the students in the Medical Faculty was at its highest during his last three years at McGill.

The late Dr. Wyatt Galt Johnston was one of the many who derived their initial impulse towards a career in science from Osler. Over forty years ago, from 1881 to 1883, Wyatt Johnston, while still a student in medicine, was his assistant in the laboratory work connected with the chair of Institutes of Medicine. He prepared his microscopic slides for demonstrations in histology and the material for practical physiology in the little room dignified by the name of "Physiological Laboratory." Johnston's work was a privilege which we all envied him, but we recognized that Osler's choice among the members of our year was a wise one. Johnston's great capacity for work, his thirst for knowledge and his intense interest in pathology was as marked a characteristic of him as a student as it was in later life.

He accompanied Osler and assisted him in most of the autopsies performed in private houses, many of these were made in the houses of the

poor in the slums of the city. Osler's pathological demonstrations at the meetings of the Montreal Medico-Chirurgical Society had created a great interest in morbid anatomy among the practitioners of the city and, as a result, special efforts were made by the medical profession to obtain private post-mortems in cases of special interest. If Wyatt Johnston was not available on one of these occasions, the student invited to take his place as assistant considered himself especially fortunate. A run to Point St. Charles in a carter's sleigh with Osler to do a post-mortem in some humble tenement was an event long to be remembered. The care with which the autopsy was made and the consideration shown the relatives of the deceased formed an object lesson in tact and in human sympathy which left a life-long impression.

Osler inspired both Wyatt Johnston and the writer with a love of science for its own sake and with ambition to master each his own subject. The desire to follow his example in research and to acquire some of his enthusiasm diverted our paths in life from the practice of medicine to the study of the special science in which each of us was interested. His advice led to our going to Germany together in 1885 for graduate work, Johnston with Virchow and the writer with Hoffman. He communicated with us at intervals and the writer still treasures the kindly letter of congratulation received on the publication of his first chemical paper in Berlin.

From the funds of the summer session of 1882, chemical apparatus was purchased for the physiological laboratory, and the writer, who had a good training in chemistry before coming to McGill, had the honour of acting as Osler's assistant in demonstrating a course in clinical and physiological chemistry during the summer session of 1883. This was the first attempt in McGill, and probably the first in Canada, to demonstrate practically the relation between physiology and chemistry.

Osler's influence over the students as a whole was never shown better than when, one night in 1883, by a humorous and kindly address to a crowded lecture room, he diverted a mob of angry students, armed with clubs and sticks, from an organized attack upon the police of Montreal. He sympathized with us in our grievance, but simply laughed us into good humour. The result was a harmless procession instead of a disgraceful riot.—*R. F. Ruttan, B.A., D.Sc. M.D., '84, Director of Department of Chemistry, McGill University.*

* * *

*MY first meeting with Dr. Osler was in his room on St. Catherine Street, when I registered as a second year student in 1882.

As Professor of the Institutes of Medicine, as Physiology was then known at McGill, he delivered an extremely practical course, stressing the importance of those portions of the subject bearing more directly on medicine. At that time his delivery was somewhat halting and not marked by the fluency he developed in later years. The appreciation of the lectures was evidenced by the silence of his auditors, only broken by the scraping of pen or pencil in the effort to record the words of the speaker.

In the following year the demonstrations on morbid anatomy were admirable, the clinical features of the case being dwelt on as well as the pathological changes. His faculty of clear and terse exposition enables

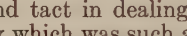
*Received for publication in Second Impression, October 10th, 1926.

many of his old students to recall the more interesting cases at this distant day.

During one of the collisions between students and police Dr. Osler's wise counsel probably averted undue provocation of the guardians of the peace. In a short talk preceding a night march through the city streets, he drew an analogy between the overheated blood of youth and inflammation, advising rest and quiet as the most important features in treatment. Later on he bailed out some of the more ardent spirits, captured and charged with assaulting the police. This incident illustrates his activity and tact in dealing with youth, giving freely of that marvellous sympathy which was such a marked trait of his character.

In later life, at his home in Oxford, he retained all the freshness and enthusiasm of youth and no visitor could leave him without being impressed by his genial reception, his wonderful hospitality and his love of the rare collection of books in his library.

Montreal *F. G. Finley (M.D. 1885)*



*Osler from the Standpoint of the Undergraduate**

IT was in the first days of the month of October of the year 1882 that I entered the office of the Registrar of the Medical Faculty in McGill University, to enroll myself as a student in Medicine, and met the then Registrar—Dr. Osler. As was his custom he speedily put me at my ease, by asking a few questions designed to enable him to place himself *en rapport* with the new student. Why had I entered McGill? Where was my home? Did I know .... and .... , who lived there?

We met again on the street some few weeks later, when to my utter amazement he saluted me by name, and asked at once if I had heard any news of the various individuals about whom he had enquired on the previous occasion.

I was then a graduate of Arts in the University of Toronto, and had passed through the hands of the late Judge Falconbridge, and Professor Baker in their capacities as Registrars, and was thus able to claim that I knew something of the limitations of that office. This was a new genus—a Registrar that knew his students by name at the second meeting, a Registrar that took an interest in you, and desired your friendship.

I at once felt that I had found a friend, but put it down to the fact that I was a nephew to Dr. Stevenson, one of the four who founded the Medical Faculty of McGill, and to my being a B.A. of another University from which it might be well to attract students.

I talked to my classmates, and found that practically every one of them felt as I did to Osler—considered him as a personal friend, had been placed upon some special relationship to him, was bound to him by some link which was purely personal.

This was the key-note. Osler forged this personal link with every student individually, and this link was never broken, though the years might be many which intervened between their meetings. I have been closely in touch with the students of two faculties of medicine for the past forty years, and I never knew a man who possessed this capacity for intimacy with his students in any degree measuring up to that pos-

*Reprinted by permission from the *Canad. Practit.*, 1922, xlvii, 242-243.

sessed by Osler. Once Osler shook his hand, the student had found a friend for life and knew it.

To encourage me to study, later on he invited me to his office, and offered the loan of works on Physiology published in French—again the personal touch, the welding of the link. That I spent the next holiday collecting and shipping live frogs for Osler was a personal testimony to his effect upon me, and I have never ceased to give thanks that I reached McGill in time to spend two years under the guidance of one who was at once the friend and inspiration of the undergraduate in medicine.

Toronto, Canada *D. J. Gibb Wishart, (1885) M.D.*

AMONG the earliest recollections I have of Dr. Osler, are those of seeing him almost daily walking down McGill College Avenue when I was a High School boy. He always seemed to be in a hurry to get somewhere. As a boy I remember admiring his personal appearance with his high silk hat and his Prince Albert coat. He knew all the children on the street and always had a cheery word for them. Later on as an Arts student, I became slightly acquainted with him as a Professor in another Faculty. My first year in medicine was spent at the University of Pennsylvania, and in the Summer Session following my Freshman year—one day in May while attending a neurological clinic at the University Hospital, I was surprised to see Dr. Osler seated on one of the back benches, like any other student. I went up and spoke to him at once and he was very glad to see me. He remarked "Wasn't that a splendid Clinic by Dr. C. K. Mills?—He is thoroughly at home in his subject." I was surprised and delighted to be invited to dine with Dr. Osler that evening at the Old Continental Hotel where we had a good talk about Montreal and medical matters in general. My last three years in Medicine were spent at McGill where I sat at Dr. Osler's feet in Physiology and Pathology and followed his clinics in the Summer Sessions at the Montreal General Hospital. I remember being called on to do a post-mortem with another student in the spring of 1884. The patient was an old sea captain of the Allan Line, a private patient of the late Dr. Geo. Ross. The ante-mortem diagnosis was "small contracted kidney." My fellow student got out one kidney which was nearly three times the normal size, and Dr. Ross had an inscrutable look on his face. I got out the other kidney, which was shrivelled up to about the size of a horse chestnut. I remarked to Dr. Osler that the post-mortem findings would fit the diagnosis of "small contracted kidney" or "large white kidney," equally well, and he smilingly agreed with me. I remember in this post-mortem Dr. Osler demonstrating six or eight bird-shot in the appendix, which he attributed to the Allan Line furnishing plenty of game for the Captain's table. There were no pathological changes in the appendix itself. After graduating in 1885 I went down to Philadelphia and secured a position as Interne in the German Hospital. Dr. Osler, who had been in Philadelphia for a year as Professor of Clinical Medicine in the University of Pennsylvania, was very kind to me and gave me a flattering letter of introduction "To whom it may concern." He proposed me as an honorary member of the Pathological Society and gave me a standing invitation to drop in and see him whenever I felt like it, which permission I gladly availed myself of frequently during the year I was in Philadelphia.

When I came out West I used to correspond with him and was always cheered by his wise words of counsel and advice. In a letter dated Baltimore, 1905, he gave me the following characteristic bit of advice, "Go slowly, and attend to your work, live a godly life and avoid mining shares."

During the nine years of my University life, Dr. Osler was, without exception, the most popular and best-beloved of all the teachers that I came in contact with. I have his photograph on my desk, given me in 1885 in Philadelphia, as a constant reminder of one of the best friends and physicians I ever met; as a continual incentive to try and make of myself the kind of physician he wished all his students to be; a never-ending argument for higher thoughts, for nobler deeds, for greater achievements.

Sioux City, Iowa *J. Herbert Darey (M.D. 1885)*

SIR WILLIAM OSLER first became known to me in 1882, when I joined the class of Medicine at McGill. He was then teacher of the Institutes of Medicine (Physiology, Pathology, and Histology). From the time I saw him, a small, alert, black-eyed, intellectual looking young man, he gave me the impression that he was one of the most, if not the most, intelligent-looking man I had ever met. His whole appearance, his speech and his ways and manners, all seemed so easy, and indicated to my mind a very well-balanced man, mentally as well as bodily, with an exquisitely perfect control over his actions and movements. He was my teacher during the two Sessions of 1882-83 and 1883-84. During those years nothing but pleasantness occurred between my beloved professor and his humble pupil.

I remember when I went to register, Dr. Osler being Registrar, he presented me with Carpenter's work on Physiology. As a gift to a student he had never seen before, this of course proved the kind of man he was. Possibly he diagnosed a case of want when he saw me.

There never was the least disturbance during Professor Osler's lecture or demonstration, for the student "body" realized that he was a man to command both respect and attention.

He had a habit of walking up and down the platform during his lectures as he was hammering in his knowledge forcefully into our more or less receptive intellectual nerve cells. He did not speak volubly, but every word and sentence were well thought out before being said, and so his lectures were very impressive and his teaching deposited deeply and permanently in the recesses of his listeners' brains.

Dr. Osler considered the post-mortem as the medical lesson *par excellence*, and he was always so anxious that the autopsies should be attended without fail, that he would not be satisfied with putting up a notice, but would tell his assistant, Dr. Wyatt Johnson, to advise us individually at the College, there was to be a post-mortem at such a time.

When he left for the University of Pennsylvania there came about an immense void at McGill and a tremendous loss for the Medical Students of that Institution. We lost his immediate teaching of medicine, and his example as a man possessed of high ideals and lofty purpose. Possibly we should thank Providence that Professor Sir William Osler divided his life between McGill, the University of Pennsylvania, Johns Hopkins and Oxford; in that way a larger number benefitted by his presence.

Montreal *A. Schmidt (M.D. 1886)*

I. THE PATHOLOGICAL COLLECTIONS OF THE LATE SIR WILLIAM OSLER AT McGILL UNIVERSITY — EARLY ACADEMIC INFLUENCES — McGILL'S HEROIC PAST. II. PERSONAL REMINISCENCE.

MAUDE E. ABBOTT, B.A., M.D.

Curator of the Medical Museum, McGill University

PART I

The Osler Pathological Collections at McGill University (1872-1884). —McGill's Heroic Past.

In the passing of Sir William Osler, the medical profession of North America has lost its most beloved and distinguished member; one whose name has been as a household word among us, whose scientific enthusiasm has leavened, and clinical acumen inspired, the medical teaching of the past three generations, and whose warm-hearted hospitality has been shared by the Profession of two continents these many years. Those portals now are darkened, and the light of mingled genius and human kindness that shone from those burning eyes has been forever quenched! To us there remains a great sadness, and an inheritance that is inviolate—the name of the great Canadian physician and the tradition of his early formative years.

At this time of retrospect it is of interest to know that there exists what may be termed a unique memorial of the first twelve years of his professional life in the Pathological Collections which he made in the autopsy room of the Montreal General Hospital, of which some 150 specimens have come down to us, which are now housed, in excellent preservation and with full records pertaining thereto, in the Pathological Museum of McGill University.

It is common knowledge that Dr. Osler, after graduating from McGill in 1872, spent two years in ardent post-graduate study abroad, and then, in 1874, was appointed to the Chair of the Institutes of Medicine at McGill, and held this post and that of Pathologist to the Montreal General Hospital until he left Montreal for Philadelphia in 1884. So that, as in the case of so

many of the great clinicians who went before him and whose lives he loved to study, the foundations of the skill and knowledge of his later life were based upon strenuous and studious early years, spent not only at the bedside, but also in the study and demonstration of the great science of pathological anatomy.

The fact is not so well known, that during these years, and even earlier, in his student days, he was not only a pathologist, but also, essentially and to a remarkable extent, a Museum collector. Just as he was, throughout his life, to use his own words, a note-book man, jotting down for future reference, every point of interest as it occurred, so it was natural for him to set aside for preservation, as a permanent record of important facts, any remarkable material which he came across in his autopsies which illustrated points of teaching value, or which were to him of interest as a basis for intensive study. In this way he quickly assembled a collection which, while especially rich in specimens of cardiac and arterial, gastric and lung diseases, is representative also of the whole range of human morbid anatomy, as well as significant of his activities in veterinary* and medico-legal medicine. Each specimen has been neatly chiselled down to show the lesion freed from encumbering details, and remains of scientific interest to-day, bearing silent but emphatic witness to his skill in dissection and selective faculty. All are fully described in his hospital protocols of the seven hundred and eighty seven autopsies performed by him here, which filled five large volumes. Of these, two have come down to us. Written almost entirely in his own flowing hand, every page gives evidence of his powers of clear diction and minute observation. Viewed in the light of these records, these specimens undoubtedly present, in visible and tangible form, the first stepping stones in a great career. As such they are of the utmost biographical interest, and an asset of immense value in the history of modern medicine.

From his literary facility and his habit of communicating to others everything of scientific importance within his knowledge, it happens that nearly every object in the collection has been reported by him either in local Society Proceedings or Reports, or in the *Philadelphia Medical News* to which he was a constant contributor, while many have been made the subject of exhaustive

*For details on this subject, see the Classified Bibliography, in this Bulletin.

studies published in foreign or home periodicals. The origin of much of his later work is to be traced here, notably that on typhoid fever, angina pectoris, aneurysms, and cardiac lesions. His *Practice of Medicine* is literally built up out of his rich memories of these and similar cases and the foregoing clinical histories, accumulated both here and in his later Philadelphia experience, and it abounds in direct references to "that beautiful healed aneurysm," "that wonderful parchment heart," etc., which apply not only or always to his own material, but also to the older collection placed here by earlier members of the Montreal General Hospital staff before his time, with every specimen of which he was most intimately familiar. How deeply this familiarity had sunk into his consciousness, and become, as it were, a part of his personality and affections, is realized only by those who were privileged to share the daily round of his work in later years, and who heard the quotations from his McGill experience constantly upon his lips.

The early history of the Museum and of the Faculty and their condition at the time of Dr. Osler's sojourn as a student are in place here, for they are among the sources on which his genius fed and from which he drew his inspiration.

The oldest and the parent Faculty of McGill was its Medical School. Like the Medical Departments of the Universities of Edinburgh and Leyden, from which it, like that of the University of Pennsylvania, may be said to be lineally descended, this Faculty took its origin as an extra-mural body, which was later merged with the University proper. It was organized under the title of "The Montreal Medical Institution" in 1823-4, by the first Medical Staff of the Montreal General Hospital, an institution that had from its foundation in the year 1822, embodied in its constitution, as an essential part of its administration, the principle that clinical instruction must be continuously and actively conducted in its wards. Five years later, on June 29th, 1829, at the first meeting of the Governors of "McGill College," this young "Medical Institution," now "an active teaching body of established reputation," was "engrafted upon" the embryo university as its Medical Faculty, and, for nearly thirty strenuous years thereafter, it conducted practically all the academic work that was done in it. Its four Founders were all graduates of the great Scottish University: Drs. William Robertson and William Caldwell, British military surgeons of experience, Drs. A. F. Holmes

and John Stephenson, young Canadians, just returned from the courses of foreign study necessary to the overseas degree, and who subsequently attained distinction, the former as an internist and botanist of repute and the first Dean of the Faculty, and the latter as anatomist and surgeon, first University Registrar and the man whose labours, more than any other single factor, are said to have saved the bequest of James McGill to his University. All were men of vigorous personality and broad educational outlook, who brought to the accomplishment of their pioneer task the traditions and methods of the Edinburgh school, which taught its Medicine and Surgery, Obstetrics and Gynaecology, by direct observation at the bedside, in the light of the autopsy findings; and they made an up-to-date Medical Library, and a Museum that became the storehouse of many valued specimens, an essential part of their initial organization. Their successors, through the next two generations, were mostly men of similar character and like educational ideals, who maintained the institutions and the clinico-pathological bias of their predecessors, and developed, both in wards and deadhouse, a grade of instruction and of student work so high that it won universal recognition, and caused this to be designated, in the sixties, by the President of one of the Royal Colleges of Edinburgh, "the best and most complete medical university in America."*

All these activities may be said to have culminated, under the influence of such men as the late Drs. G. W. Campbell and R. P. Howard, in the early seventies, in what may be termed the Faculty's second period of clinical prestige and productivity (since the passing of its Founders marked the first). At this time, and within this atmosphere of fermenting intellectual activity, among and of the company of a bevy of youthful spirits of kindred mettle, all keyed to the joy of the working and fired by the opportunities for exact knowledge which the hospital afforded, there entered, in the year 1870, "attracted by the *clinical* advantages of McGill" as a student in the final year of his course, the youth of twenty-one years of age, who was destined to rank among the leaders of medicine.

We may picture him at this time, with his lithe, slight figure, and dark, almost Spanish colouring, alert, keen, enthusiastic, yet withal retiring, with the kindly whimsical humour that tempered

*See *Can. Med. & Surg.*, 1861, II, 207.

MONTREAL GENERAL HOSPITAL

AS IT WAS AT THE TIME OF DR. OSLER'S SERVICE SHOWING CUPOLA AND SLOPING ROOF ERECTED IN 1822.

his every thought shining in his eyes, and the fires of a passion for knowledge by direct observation, and of consecration to the day's work and to the service of distressed humanity aflame within him, replete with the charm that springs from a heart overflowing with affection and goodwill to his fellows and that made him at once the most human and most lovable of men,—*so* William Osler stood, on the threshold of the unknown future, at the parting of the ways!

His interest in the post-mortem room and his free use of the microscope, are among the most conspicuous facts in his history, revealing as they do, the quick grasp of essentials which was the outstanding feature of his genius. Already, in 1872, we find him, while still a student, assisting his Chief at the Medico-Chirurgical Society by the demonstration of pathological material,* and publishing, from a student-pen, his first classic case reports,** with autopsy findings. With characteristic simplicity of thought and direct action, he chose for his graduation thesis the broad subject of Pathological Anatomy illustrated by microscopical slides and specimens, some of which, those on tyhoid fever, are preserved in the Museum collection to-day.***

Small wonder was it that, at this time, he attracted first the interest and then the appreciation and affection of Professor R. P. Howard, who opened to him the doors of immediate advancement. In his introductory lecture, delivered in September, 1873, Dr. Howard made the following statement of his faith in and aspirations for the future of his young favourite:

"In connection with the new subject of scientific interest, the older students present, as well as my colleagues, will be pleased to hear that Dr. Osler, who graduated here in 1872, has just made a discovery of great interest, and that promises well for the future of our young countryman." . . . . . " I wish some friend of the University would endow a Chair of Physiology and Pathological Histology, and that our young friend might be invited to accept the appointment, and devote himself solely to the cultivation of his favourite subject, and at the same time bring honour to himself and Canada."†

How quickly these hopes of Dr. Howard's were realized we learn from Dr. Osler's own Introductory Lecture to his practical course on the Institutes of Medicine,†† delivered by him in October,

---

**Can. Med. & Surg. Journ.*, 1872, VIII, p. 408; also Bibliography, this Bulletin, Rubric I.

***Ibid.* p. 473.

**** Museum Specimen, Entry No. 1885.

†*Can. Med. & Surg. J.*, 1874, II, 208. ††*Ibid*, 1875-76, IV, 202.

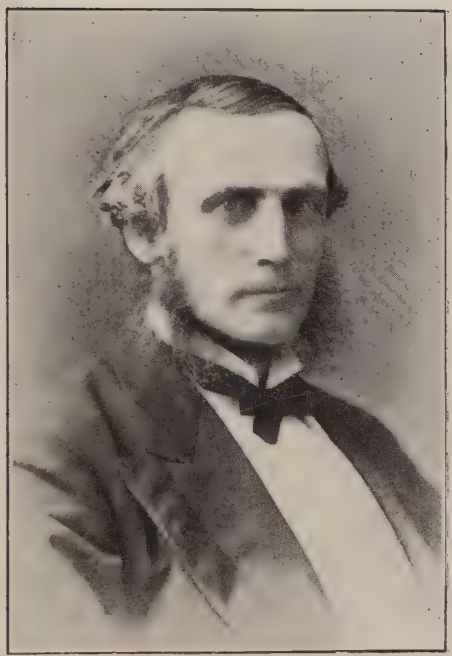
1875. In it we find him instructing his students in the use of the microscope, and in the technique of preparing, staining and cutting their material for investigation, informing them that a supply of microscopes for their personal use had been ordered from Paris and Potsdam, promising them well-equipped physiological laboratories under his charge in the near future, and outlining the session's work in a comprehensive, and, for that date, remarkable, synopsis, which covered in a single course, clinical and medico-legal microscopy, as well as microscopic technique and normal histology.

Part II

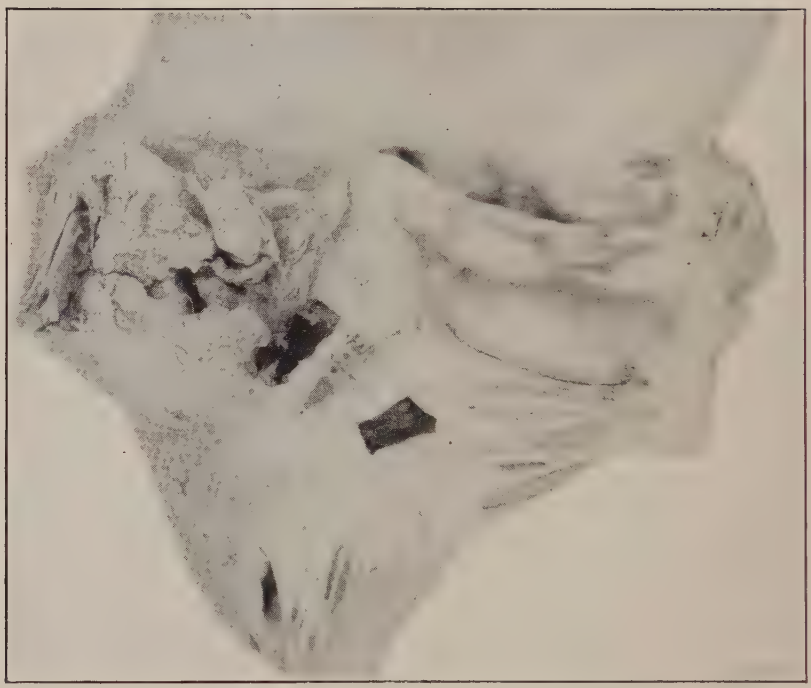
Dr. Osler's Later Relations with the Museum (1898-1913) Personal Reminiscence.

In the year 1898 the writer of this reminiscence was appointed to the care of the Pathological Museum of McGill University. Dr. Osler was at that time Dean of the Faculty and Professor of Medicine at the Johns Hopkins Medical School; but his affection for the scene of his old labours, and his vivid interest in all that pertained to his own collections and to those of his colleagues and predecessors here, led to the establishment of an intercourse which will be of interest to students of his life, in that it discloses, in a very real way, certain vital characteristics: his sustained interest in every subject which had once come within his range of study or observation; his capacity for seizing upon relevant facts, as illustrated in these old records, and applying them to the elucidation of the questions which absorbed his present attention; and last, but not least, that instantaneous response and whole-hearted sympathy and support with which he met every earnest worker in medical research, and by which he supplied a stimulus and an inspiration that saved many a virgin effort from failure and brought to fulfilment the aspirations of hundreds of young lives throughout the length and breadth of this continent, during the twenty years that intervened between his McGill and his Oxford days; for these reasons, the necessarily personal nature of the following reminiscence will be excused.

My first meeting with Dr. Osler was in December, 1898, when I was sent by the Medical Faculty of McGill to Washington to see the Army Medical Museum, and other institutions *en route*.



Dr. R. P. Howard, Dean of the Medical Faculty of McGill University during Osler's Montreal Period.



MALIGNANT ENDOCARDITIS OF BICUSPID AORTIC VALVE
(GOULSTONIAN LECTURES SERIES)

From a specimen in the Pathological Museum of McGill University, presented by W. Osler, 1882.

Note that a section has been cut out by him from the base of the mitral valve for microscopic examination of the tissue beyond the seat of the vegetations.

Arrived at Baltimore, and following the instinct that impelled nearly everyone where Dr. Osler was concerned, I sought him out, first, with my introduction. I found him, at ten minutes to nine, just leaving his lecture room for his ward-round, which I was invited to join, and to which I followed him with the usual crowd of students, internes and guests. The visit over, the procession had just left the wards when an unpleasant, but certainly fortunate, accident, befell me, which threw me suddenly into personal contact with him to an extent that even my connection with McGill was not likely to have done. Standing, for a moment, with my hand on the lintel of the half-closed door, someone swung the other heavy half-door to, crushing my finger and neatly extracting the nail. Dr. Osler's concern took the form, after the finger had been dressed by an interne, and a profitable morning given to me in the Pathological Department on his introduction, of an invitation to dinner that evening. "Come at a quarter to seven," he said, in the hospital lunch-room, where I had been conducted at his request, "and be sure to take a rest this afternoon." The appointed time saw me at No. 1 West Franklin Street and I was shown to Dr. Osler's study, where I found him alone among his books. After a few minutes I ventured to ask him if he would give me a reprint of his "Internal Medicine as a Vocation." "Oh, do you like reprints," he said, "come in here"; and he led the way into a small room off his study which seemed to me to be completely lined with reprints, arranged in piles on the shelves. "There you are,—and there,—and there," handing me one after the other, "Thomas Dover," "John Keats," "William Pepper," "Locke as a Physician," etc., etc., until I had a great pile. "And this," he said, handing me a blue pamphlet, "is the one I like better than anything else I have ever written." It was *An Alabama Student.* That night, alone at the Clifford, and examining my treasure-trove of reprints, I read for the first time that charming essay, and caught in its familiar opening words a glimmering of insight into the simplicity of thought and springs of action of one, the secret of whose greatness lay in the fact, that, in a widely different age and scene, he was still, as it were, The Servant in the House, and the prototype of that divine Physician of whom he speaks, Who trod the streets of Nazareth, and wandered on the hillsides by the Lake of Galilee.

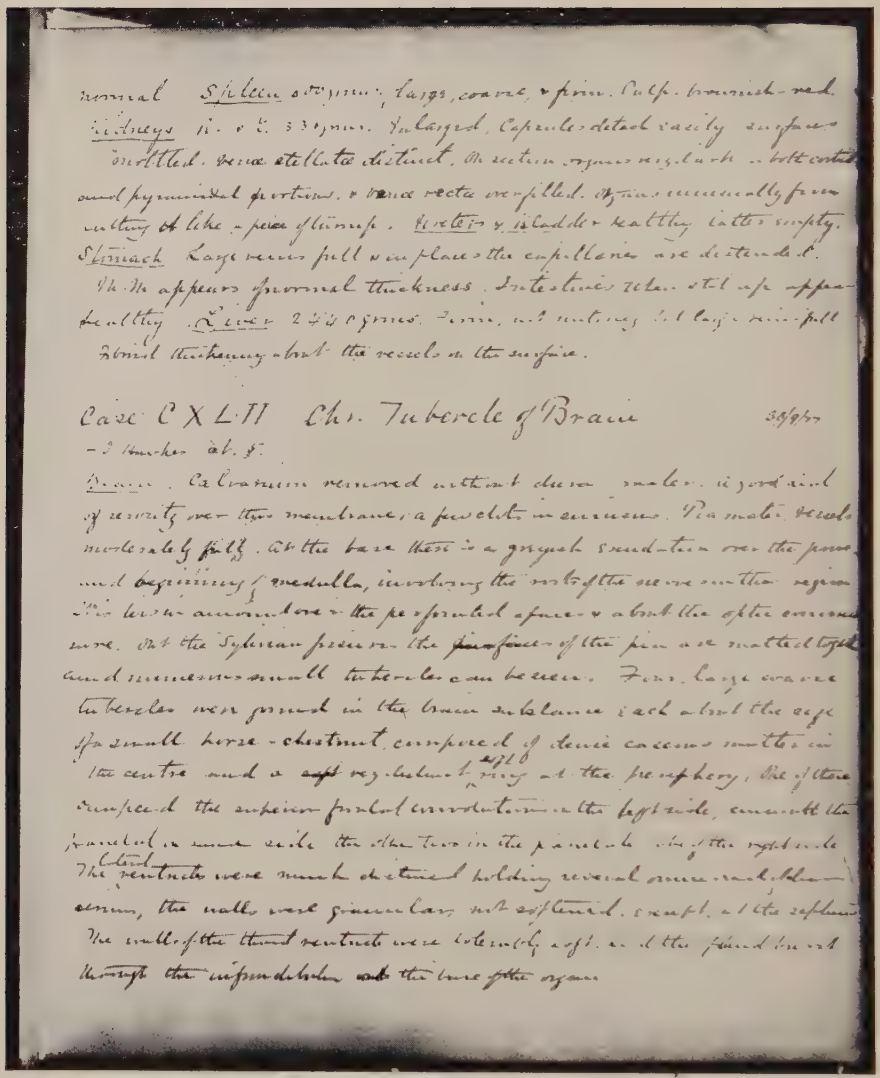
"*Chief among the hard sayings of the Gospels*" it begins, "*is*

the declaration,—he that loveth Father or Mother, or son or daughter, more than me, is not worthy of me. Yet the spirit that made possible its acceptance and which is responsible for Christianity as it is, or rather perhaps, as it was, is the same which in all ages has compelled men to follow ideals, even at the sacrifice of the near and dear ones at home. In varied tones, to all, at one time or other, the call comes: to one to forsake all and Follow Him; to another, to scorn delights and live the laborious days of a student; to the third, to renounce all in the life of a Sunnyasi. Many are the wand-bearers, few are the mystics, as the old Greek has it, or in the words which we know better,—many are called, but few are chosen. The gifts were diversified, but the same spirit inspired the flaming heart of St. Theresa, the patient soul of Palissey the potter, and the mighty intellect of John Hunter."

Dinner over, the great experience of the evening came, for this was one of Dr. Osler's students' nights, in which I had been invited to participate. Seated at the head of the long dining-table, now covered with a dark cloth, with nine young men and three young women ranged around it and me beside him at the end, and with a little pile of books before him, he began by introducing four rare editions from the classics of medicine to his hearers, with a few wise words of appreciation on each. Then followed a delightful talk upon points of interest or difficulty in the week's work, for these were all his clinical clerks, the reporters of cases in his hospital service. "Well, Miss——, what is your trouble this week?" he began. "And yours?" turning to another. And then, as I sat there with heart beating at the wonderful new world that had opened so unexpectedly before me, he turned suddenly upon me, "I wonder, now, if you realize what an opportunity *you* have? That McGill Museum is a great place. As soon as you go home look up the *British Medical Journal* for 1893, and read the article by Mr. Jonathan Hutchinson on 'A Clinical Museum'.* That is what he calls his museum in London and it is the greatest place I know for teaching students in. Pictures of life and death together. Wonderful. You read it and see what *you* can do." And so he gently dropped a seed that dominated all my future work. This is but an illustration of how his influence worked in many lives.

*See The Clinical Museum: an Explanatory Address, by Jonathan Hutchinson, F.R.C.S., F.R.S., *British Medical Journal*, 1893, II, pp. 1295-1296.

The old Pathological Museum of McGill University (burnt down in 1907), as it was when Sir William Osler worked over his collection in 1905. Many of the specimens on the shelves were placed there by himself in 1877-84.



A page from Dr. Osler's Pathological Reports Book at the Montreal General Hospital in 1877.

The next episode came in the following year, that of 1899, when, in working over the collection, I came upon a remarkable three-chambered heart with pulmonary artery given off from a small supplementary chamber placed at the right upper angle of the common ventricle. No information about it seemed available, until enquiry by letter from Dr. Osler elicited the statement that he remembered the specimen perfectly, having often demonstrated it, and that it had been presented before the Edinburgh Medical Society by Dr. Andrew Holmes, first Dean of the McGill Medical Faculty, and was reported in one of the very early Edinburgh Medical Journals. An examination of the literature revealed the case fully published with a fine copper-plate engraving of the heart in the *Transactions of the Edinburgh Medico-Chirurgical Society* for 1823,* at which time it had been obtained by Dr. Holmes from an autopsy done by himself, in the presence of the other Founders of the school.

The renewal of Dr. Osler's active interest in the Museum may be said to have dated from this time, and a succession of kindly notes of help or encouragement began then, which culminated, in the years 1904 to 1906, in an active correspondence and substantial support, which it is my purpose to retail here.

A word upon the condition of the Pathological Museum at this time and my own relations with it is in place. Founded as the School was upon the Edinburgh tradition, which stressed the correlation of the pathological findings with the clinical features of the case, the Museum had been from the first the repository of cherished specimens obtained by the early members of the School, often at the cost of much personal exertion, and its contents had been largely augmented by Dr. Osler himself, during his period as Pathologist to the Montreal General Hospital. It was thus a collection of much historical, as well as pathological value. Up to this time, however, the office of Curator had been a purely honorary one, and no systematic cataloguing had been done. It had now become my task to assemble the archives of the collection, and I began by a search of the Montreal General Hospital Autopsy Records and of the contemporary Medical Journals, in which many of these specimens had undoubtedly been recorded.

*A Case of Malformation of the heart, by A. F. Holmes, M.D., Montreal, Lower Canada. Communicated by Dr. Alison, March 5th, 1823. *Transactions of the Medico-Chirurgical Society of Edinburgh*, 1824, p. 252. Republished by M. E. Abbott, *Montreal Medical Journal*, July, 1901.

The real interest of this search began with the discovery, among the Montreal General Hospital Records, of two volumes of Dr. Osler's own post-mortem notes. I shall never forget the impression which these clearly written pages and accurately portrayed descriptions, and above all, the exquisite orderliness of this, the unseen daily task of his youth, made upon me at this time. Genius was written broad upon these pages, and there is no joy given to us greater than that of the first moment of recognition of the Master Mind.

Case after case was recorded here by the name or hospital number which the specimens bore and many others apparently referred to specimens without reference. So also the old *Canada Medical and Surgical Journals*, the *Transactions of the Medico-Chirurgical Society and the Montreal General Hospital Reports*, were freely interspersed with communications by Dr. Osler bearing directly upon these very specimens and upon many others without reference-number attached which were set out by me for his identification when a chance visit from him might bring the opportunity.

In the Spring of 1904 he came, for the first time in my Curatorship. Five years had elapsed since I first saw him in Baltimore, and much progress had been made in the museum, for the Faculty had actively supported its development, and the seed which he had himself implanted in my mind, of the value of correlating clinical data of importance with the findings shown by the pathological specimens, had borne ample fruit. All the specimens of the old collection, for which a reference had been obtained stood, with full clinical history inscribed upon their catalogue sheets, among the new material, and a plan of "collaboration with clinicians" and experts had been evolved, under which the cataloguing of the various sections was proceeding, and an active system of museum teaching had grown up, which owed its vitality largely to the correlation of the "clinical aspects" with the pathological features of the case.

The whole met with Dr. Osler's approval, and his enthusiasm was great over the fact that a catalogue of his own beloved specimens and o the older part of the collection had at last been placed on paper. Dropping into a chair, and fingering with tender affection the old autopsy books and journals, he began rapidly eliminating uncertainties with characteristic running comments as he did

so. "That fellow, now, I remember well," scribbling rapidly on a card belonging to a large aneurism of the ascending arch of the aorta that was innocent of any trace of laminated clot, and that had ruptured into the right pleura. "It took a long while before the diagnosis was made, but he came back to the hospital at last with a pulsation in the second and third right interspaces. So we put him to bed and tried to cure him with big doses of Pot. Iodid. He got 120 grains a day, and the pulsation had disappeared. We were talking of discharging him in triumph, when one day he died suddenly, and we found—*that*" "And this," seizing suddenly upon a small unlabelled specimen which had completely mystified me, for it represented a small piece of apparently quite healthy thoracic aorta with a round hole in its wall leading into a sac the size of a tangerine orange, which lay between it and the oesophagus and opened into this by a small jagged tear. "*This* is that extraordinary case of mycotic aneurism of the aorta rupturing into the oesophagus. She died suddenly without any warning at all. It is reported by me in the *International Clinics*. There is a beautiful coloured frontispiece of it done by old Mr. Raphael. Have you any other cases of mycotic aneurism to go along with this?— Oh that one, that's a new specimen, magnificent,—whose is it?— McCrae's—I say McCrae," turning to Dr. John McCrae who stood among the little throng of chosen ones who were following him in his peregrinations through college and hospital, "You'll report this case, won't you? It will be one of the best in the literature." And John McCrae did report it.*

His interest took the practical form, too, in the autumn of 1904, of raising, by means of a printed circular issued by himself to McGill graduates and their friends, funds for the publication of the first part of the catalogue, and himself revising every sheet of that portion of it then being prepared for the press. More than forty letters written by him during the year 1904-1907 on these subjects have been preserved, and with the notes inscribed by him on the manuscript of the catalogue, remain to attest these activities. Always short and to the point, overflowing with his lively and persistent interest in all that had once attracted his observation, and with the encouragement and the stimulating suggestions with which he invariably directed the energies of the

*"A case of Mycotic Aneurism of the Aorta with Malignant Endocarditis," by John McCrae, M.D., M.R.C.P., *Journ. Path. and Bact.*, 1905.

younger generation to fresh sources of information and research, these letters form an eminently characteristic record. A short quotation here must suffice. "I see you have a specimen of calcification of the pericardium. It would be well to speak of it in the introduction. There is a very good article two or three years ago in the *Pathological Society's Transactions.*" "I have read the Endocardium section with the greatest interest. Something should be said of foetal endocarditis, just to clear the minds of the students." "Remind me, please, to go over the Aneurysm cases in my Post-mortem notes. There are twenty-nine or thirty of them. No. 180, I see, is perforation of the pulmonary artery." "It would be well," writing on the Section on the Myocardium in December, 1905, "to include a paragraph on the fibres that minister to the rhythmicity and conductivity of the heart, the so-called bundle of His, which has just been described by Tawara, working in Aschoff's Laboratory."

The climax of his benefactions may be said to have been reached in his relations with this Association. In January, 1906, he encouraged and assisted in the Proceedings preliminary to its organization, and later, in the same year, sent in the formal support of Oxford University, signing the organization circulars issued from the Army Medical Museum in duplicate for himself and Professor James Ritchie. In the spring of 1907, on the occasion of his return to Canada from Oxford, he attended the first regular meetings of the Association at Washington, and himself laid down, as an essential principle, that the Association should publish a Bulletin and aim at the establishment of an Index Pathologicus. In 1911, on the occasion of a visit of the writer to Europe, he called a meeting of British Pathologists at the Royal College of Surgeons, with himself and the late Sir Jonathan Hutchinson in the Chair, which meeting resulted in the organization of the British Local Section; and then, at the close of this meeting, arranged, in truly Oslerian fashion, that the writer accompany that venerable scientist, "the greatest Museum genius alive to-day," to use Sir William's own words, to his beautiful home in Surrey, where, on a never-to-be-forgotten Sunday morning, he demonstrated to me the treasures of his historic and scientific collection and his great Museum of the local fauna, flora, and archaeology of the district. Then came, in 1913, the last International Congress of Medicine and his final benefaction, when, at the close of our successful

organization of the Section of Museum Technique of the Congress Museum, carried on again under the stimulus of his presence and approval—he supported the appeal of this Association to Lord Strathcona which resulted in its acquisition of the nucleus of an Endowment Fund.* His letter in regard to this benefaction reads:

"I have written to Lord Strathcona telling him about the work of the Museum and the Association, and thanking him for his support. That you should have this money means, I know, all the difference in the world—only you deserve a larger sum!"

The veil, by which intimacy of contact and innate modesty of heart screen the personality of the truly great from the full vision of their contemporaries, has been lifted for us now by the hand of death, and we see William Osler among those whom Carlyle has called the heroes of the race. His exact position in the history of medicine is for posterity to adjudge; but the revelations made by his pioneer work in pathological anatomy as shown in his collections and early publications, and his perennial interest in the facts of nature which this work had declared to his searching gaze, yields no uncertain forecast. Where the palm is given to versatility of genius and power of expression, unfailing accuracy of observation, instantaneous recognition and correlation of significant data, and that all-embracing creative faculty which forms, out of the multitudinous details of a crowded experience, new, fresh, and clear concepts of humanitarian value,—*there* the name of William Osler will be written large, beside that of Rudolph Virchow, the apostle of his youth, and Jonathan Hutchinson, the enthusiasm of his maturer years.

*$5,000.00 donated by Lord Strathcona to this Association on September 26, 1913. See *Bulletin V.*, p. 166.

SIR WILLIAM OSLER AND THE McGILL MEDICAL LIBRARY

JEAN CAMERON

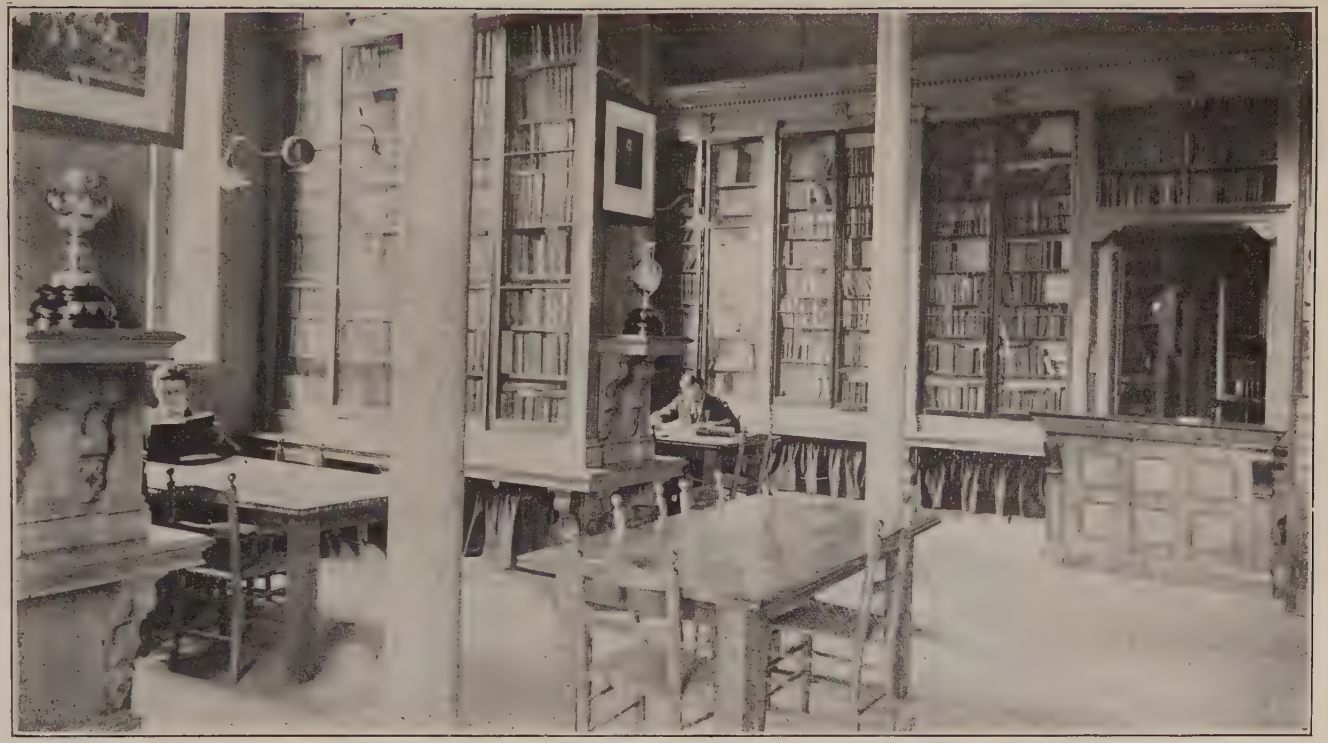
Assistant Librarian, Medical Library of McGill University

WE read in Dr. Ruhräh's article on "Osler's Influence on Medical Libraries", that the Medical Library of McGill University became Osler's first love, his interest in it having begun during his student days. Later when he became a member of the Faculty, he preached the value of correlative reading, and students who sat under him during his teaching days will recall many suggestions that they turn into the by-paths of medicine.

His work in connection with the Library falls quite naturally into two divisions—tangible and intangible. As regards the latter it was the personal touch that counted for so much—brief notes with a word of encouragement *à propos* of the latest library report—often accompanied by a subtle hint, which on consideration was always found to be well worth following: a request to let him know of what value he might be in picking up treasures abroad, or again a letter explaining the historic interest of a recent gift. And above all, his visits—most often far too fleeting, but all showing the same keen delight in the progress of the Library.

To turn first to his gifts other than books. In 1910 a letter came to the Library from Oxford, from which I quote the following: "I am sending to you a few pictures of famous clinicians. May I make a suggestion—that you should try to develop the pictorial side in the building, and have pictures of the famous men in each department." Two of these photographs impressed him as being particularly worthy of mention—that of "Master John Banister's Anatomical Lecture, 1581", which Sir William says was one of the earliest representations of an English lecturer, and the photograph of Basedow which was specially got for him by Basedow's granddaughter. Whilst he had previously contributed largely in this way, this date seems to have been the first on which he urged the enlargement and development of this part of the Library.

In 1909, during a visit to Rome, he collected for us many



Medical Library at McGill During Osler's Time

donaria excavated from the banks of the River Tiber. These votive offerings, which are all in quite excellent condition, are terra cotta models of various parts of the body which were thrown into the river as thank-offerings for healing of disease.

Amongst other treasures are the illuminated diplomas which Sir William described in the following note: "diplomas in the form of a small quarto book, with the special style of decoration seen in these, and in a handsome binding, seem to have been peculiar to Venice (where they were granted by the College of Physicians and by the Company of Aromatarii of Apothecaries) and the universities of Northern Italy, viz., Padua, Pisa, Pavia, Perugia, and others. . . . the seals are nearly always wanting, so that these diplomas are unusually perfect and well preserved specimens." Of this collection, ten in number, all are originals except one, and this a fascimile of a diploma granted to Harvey by the University of Padua in 1602.

Of the volumes already presented to the Library by Sir William—some two hundred—the few noted below are perhaps peculiarly striking:

Vesalius: *De humani Corporis Fabrica Libra septum.* 1543.

Linacre: *Britanni de emendata Structura Latini Sermonis Libra sex.* 1550.

Harvey: Anatomical Exercitations concerning the Generation of living Creatures. 1653.

MacMichael: Gold-Headed Cane. 1827.

The Vesalius he picked up in Rome in 1909, and sent out to the Library with a note on the life and work of the author. In this note he pays a compliment to the teaching methods of his Alma Mater when he says, "I am glad to send this beautiful copy of the first edition to the library of my old school, in which anatomy has always been studied in the Vesalian spirit with accuracy and thoroughness."

We have spoken of his influence and generosity in the past—let us look to the future when his valuable library of incunabula and rare first editions will come to McGill. There is ready now such housing as may be worthy of its sentimental and historical value, and which may in addition be a lasting memorial to the man, who, by his interest and kindly suggestions, has always been an inspiration to those who have striven for the growth and well-being of the Library.

A REMINISCENCE OF SIR WILLIAM OSLER

D. Bryson Delavan, M.D.

New York

MY acquaintance with Dr. Osler extended over a period of more than forty years, in the course of which our paths crossed many times, from different directions. Through personal contact and correspondence both professional and social, through his addresses listened to and his writings read, and through the often expressed opinions of others, many opportunities were offered for an understanding of his character, temperament and ability, and for estimating the value of his attainments. Others will record extended observations concerning his work and worth and will offer appreciation of him far more eloquent than any I could express. Among examples illustrative of him that might be quoted, two personal incidents, although apparently trivial, vividly recall the man and indicate some of the characteristics which dominated his life.

In the early eighties, as Assistant Pathologist to the New York Hospital and Curator of its Museum, I was associated with the late Dr. George Livingston Peabody, head of the Pathological Department, a graduate of Columbia who had recently received his appointment to the Hospital after several years of study abroad. At Vienna, Prague,Leipsic, and other Continental cities he had devoted himself especially to courses in histology, pathology, pathological anatomy, and the use of the microscope, then beginning to be of recognized importance. Dr. Peabody was a man of fine family connection and social standing, of broad culture and delightful personality. Subsequently he was for many years Attending Physician to the New York Hospital, and Professor in the College of Physicians and Surgeons. Naturally brilliant, his mental powers had been highly developed through the best educational opportunities. In his experiences abroad his excellence as a student and his personal influence enabled him to gain admission to the laboratories of the most distinguished masters, men who received under instruction only the ablest and most promising pupils. Thus Peabody was thrown among groups of bright and ambitious men from everywhere, aspirants

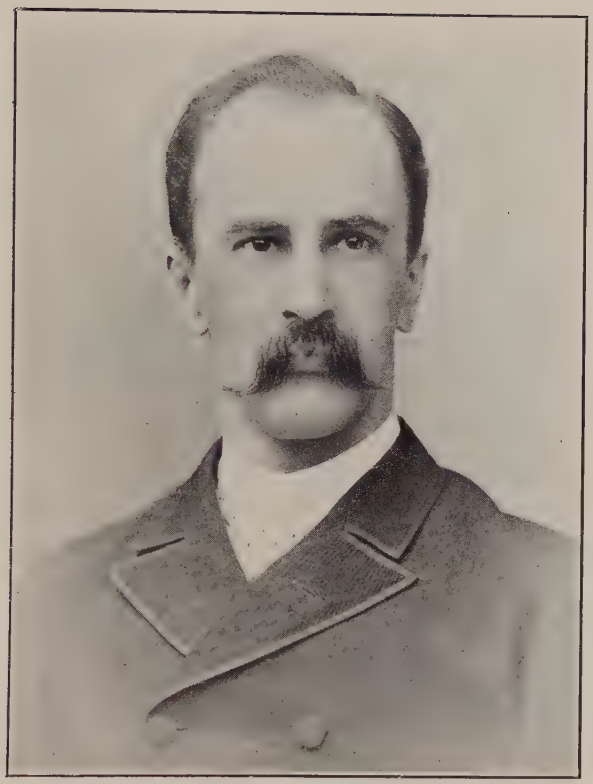
who represented the choicest of the young talent of the day. Among these he selected many valuable acquaintances. In my daily intercourse with him in our laboratory in the upper story of the fine old Thorn mansion adjacent to the New York Hospital, and often in company with our splendid friend Dr. William Tillinghast Bull who had been his companion abroad, much was said of their experiences in Europe and of the men with whom they had been associated. The abilities, the personal attractions, and the probabilities of future success of these student companions were often freely discussed. Among them they frequently mentioned one who seemed to have gained the warmest admiration of all. He was a man from Canada who bore the modest name William Osler. Of him they always spoke with enthusiasm as being by far the most promising, predicting for him a brilliant career. He had already gained a position in McGill University, as they had at the College of Physicians and Surgeons. Well prepared to appreciate him, my first impressions far surpassed expectation.

One bright afternoon while working in our laboratory, the door was suddenly opened and a picture was presented never to be forgotten by me. In the full light of the room, framed in the doorway and with the dark background behind, there appeared in the verasimilitude of a portrait the presence of a particularly attractive young man, radiating the spirit of youthful buoyancy and delight, an expression instantly reflected in the countenance of his joyously welcoming friend. Never was there manifested more perfect sympathy of heart, mind, and soul than shone from the faces of those two fine youths. My introduction to Dr. Osler proceeded at once, and the acquaintance begun from that moment was happily continued until the end of his wonderful life.

Nothing could seem more commonplace than the following incident, but it is strikingly suggestive of a spirit as broad as it was human, and graphically portrays the character of the man.

In 1890 the Tenth International Medical Congress was being held in Berlin. Seven thousand members were enrolled and the meetings of the sections were long and arduous. One noontime, adjourning from one of the sessions weary and in need of refreshment, I met Dr. Osler who, his customary exuberance in no wise dimmed by the strain of the morning, like myself was hastening

to lunch. Catching me by the arm he at once plunged into a lively series of questions as to what I had been doing at the Congress, whom I had met, and how profitable I had found the meetings. Presently another acquaintance appeared across the narrow street. Him also Osler hailed and locking arms between us proceeded onward, drawing from us a running fire of conversation and convulsing us with his witty remarks. By the time we had reached the restaurant only a short distance away, Osler had joined to our happy trio one by one, five other members, each wandering alone, all congenial friends and delighted to have been admitted to our party and thus rescued from the fate of a lonely meal. Under the inspiration of his inimitable spirit the repast which followed, although the simplest of its kind, became a royal banquet, a bright memory throughout our lives. He made the conversation general, no member of the group escaping his notice and his friendly attention. Informing himself as he did of our particular interests and incidentally enlightening us as to his own, he with rare vivacity and wit discussed the Congress itself and the men and events associated with it. The incident was typical of him. Generous, gracious, magnetic, responsive, he attracted to himself all who were worth knowing, ever seeking merit in others and appreciating it when found. At once a discerning companion and a great leader, he, more than others, has exemplified to me the beauty of friendship, the glory of work, and the joy of living.



William Osler during his Philadelphia Period
(about 1887)

From a photograph taken by H. C. Phillips
1206 Chestnut St., Philadelphia, Pa.

1 2 3 4 5 6 7 8 9 10

1. Dr. Henry W. Cattell. 2. Dr. Guy Hinsdale. 3. Dr. Pierson Willitts. 4. Dr. John K. Mitchell. 5. Dr. George E. de Schweinitz. 6. Miss Clara Dalziel. 7. Dr. William Osler. 8. Mrs. Green. 9. Dr. Jos. Otto. 10. Miss Jane Dalziel.
Dr. Osler at the Orthopaedic Hospital of Philadelphia with Nursing and Interne Staff. (Illustrating the Reminiscence by Dr. Morris Lewis).

FOREWORD

DR. WILLIAM OSLER IN PHILADELPHIA

CHARLES K. MILLS, M.D.

Philadelphia

THE articles on Dr. Osler's period in Philadelphia by Drs. Landis, Krumbhaar, Dock and Hare, and the student reminiscences by Drs. Leidy, Edwards, Dercum, Burr and Lewis present so clearly and in such an interesting and instructive way the story of Dr. Osler in Philadelphia that little seems left for me to write in the form of a foreword or introduction. Before the time of his coming to Philadelphia, my attention had been directed to Dr. Osler by some contributions which he had made to cerebral morphology and physiology, subjects in which I had been much interested for at least ten years.

My experiences with Dr. Osler were chiefly in connection with the Philadelphia Hospital or "Blockley," and in three Philadelphia medical societies, namely, the Neurological, the Pathological, and the College of Physicians. I also saw not a little of him at the Medical School of the University of Pennsylvania where I was then lecturing to fourth year and occasional post-graduate students, and where I had been, some years previously, chief of clinic to the neurological service of Dr. H. C. Wood.

Dr. Landis tells us much regarding Dr. Osler's doings in the Philadelphia Hospital, and Drs. Dock, Edwards, Leidy and Dercum inform us as to his work at the University Hospital as a clinician, teacher and investigator. The last and Drs. Burr and Lewis bring into the foreground

his connection with the Orthopaedic Hospital and Infirmary for Nervous Diseases, while Dr. Hare's paper is an eloquent contribution to our knowledge of Dr. Osler as a clinician, teacher and man. To Dr. Krumbhaar we are indebted for an appraisal of Dr. Osler's interest in the Library of the College of Physicians and in books and libraries in general.

Not infrequently I was in close contact with Dr. Osler in the "dead room" or post mortem laboratory at Blockley, as at the time of his sojourn in Philadelphia I personally made many necropsies, and I also spent much time in studying the morphology and anatomy of the brain. Probably no visiting physician at the Philadelphia Hospital made more autopsies with his own hands during the time covered by his comparatively short connection with the hospital. Sometimes I was fortunate enough to get from him hints and helps in connection with my own work.

As is said by Dr. Landis, he not infrequently wrote out with his own hand the descriptions of the findings at the necropsy or in other instances patiently dictated to the *internes* or assistants the results of his examinations. This work never seemed to pall on him and in its pursuit he was nearly always surrounded by a group of students, *internes* and others.

The Pathological Society and the Neurological Society of Philadelphia were rich beneficiaries of his Blockley labours, as a study of his bibliography abundantly shows. His chief aim in these labours appeared to be a complete study of all parts of the human organism, although at times he gave special attention to the study of lesions of the brain, spinal cord and the thoracic viscera.

In the Pathological Laboratory of the Philadelphia Hospital he made numerous injections by the gravity or hydrostatic method, this being as nearly as I can recall, of the circulation of such organs as the kidneys, liver and the brain. Some years previously, in the laboratory of Professor Joseph Leidy, with Dr. A. J. Parker, I had made

a study of the cerebral circulation, using simply a hand syringe, and my observations of Dr. Osler's work stimulated me to an adoption of this better method. One of the results of it was a study, under my encouragement, of the cerebellar circulation, by Dr. S. D. Ludlum.

Dr. Dercum touches upon the work of Dr. Osler in the Philadelphia Neurological Society, which deserves a fuller recognition. Within a few months after he was settled at his work as professor of clinical medicine at the University of Pennsylvania, he became an active member of the Philadelphia Neurological Society, taking a continuous interest in its proceedings and contributing much to its transactions. During the whole period of his Philadelphia sojourn, Dr. Weir Mitchell was president of the Philadelphia Neurological Society. This society was founded in 1884 and first contained a rather small group of men interested in clinical neurology and in the morphology, anatomy and physiology of the brain. Such men, in addition to Dr. Mitchell, were Drs. Wood, Lloyd, Dercum, Brubaker and others, whose names have since become closely interwoven with the progress of neurology here and elsewhere. Osler seemed to be particularly happy and at home as a member of this group. A study of the minutes of the meetings in 1886, 1887 and 1888 clearly indicate his interest in all that pertained to neurology.

Bright in my memory remains another aspect of Dr. Osler in Philadelphia. The University Club was then located on Walnut Street, a short distance from the site of the College of Physicians, where most meetings of medical societies were held. After our scientific presentations and combats in the neurological society, it was often the custom of a small group of congenial spirits to resort to the club for a meeting of another sort, which not infrequently took on almost the length of the previous gathering. Several members of the group like Osler, were much interested in literary and historical matters outside of the immediate domain of medicine. On these occasions, with

moderate encouragement of good physical cheer, the time passed gaily as we talked of medical classics, of history, poetry, philosophy and the like. We took random shots at Hippocrates and Galen, at neo-Platonism, at Machiavelli, Montaigne, Sam Johnson, Shakespeare, Wordsworth, Tennyson, or some other light of literature. Now, as one of the old guard of neurology, my memory goes back with delight to these halcyon days of pleasant association in which Osler was ever a central figure.

DR. WILLIAM OSLER IN PHILADELPHIA

1884-1889.

GEORGE DOCK, M.D.

Pasadena

MY account is necessarily incomplete, for I was away from Philadelphia about half the time Osler was there, but it may be of value in connection with others that I hope may be obtained.

Osler did not come as a stranger, for he was well known to an active group working with Dr. John H. Musser by contributions to the "Medical News" and "The American Journal of the Medical Sciences", which had appeared with increasing frequency since 1882. These showed him to be a remarkably alert and well-informed clinician, who had already made his mark on almost every topic one looked up in current literature. His arrival caused no perceptible excitement in University circles or in the profession, for brass bands and newspaper réclame were not known in medical Philadelphia. He quietly took up his medical school duties, and opened an office in the Harley street section, where he began the innovation of having no office hours and seeing patients only by appointment. From the beginning these patients were

interesting rather than lucrative, frequently physicians or members of their families. From the beginning also the notable features of thorough study, wise and useful advice and an unusual interest and sympathy were conspicuous.

In the medical school and also among the staff of Jefferson Medical College and the profession in general, as well as among clever and well informed men of every line of activity, Osler at once showed his unusual capacity for making friends and admirers, and his attraction for bright and inquiring minds. Although he sometimes spoke of his shyness, he was always cordial and unassuming. To a prominent woman who asked him whether he called it Osler or Ossler, he replied; "I will answer to Hi! or to any loud cry". His irrepressible playfulness was shown the first Sunday after he arrived, when Dr. D. Hayes Agnew, the most pious and most venerable member of the faculty, asked him to church, which Osler of course accepted. On arriving in the pew Dr. Agnew asked him why he did not bring Mrs. Osler. "Mrs. Osler is a Buddhist, and would not come" was the startling reply.

Osler at once took an interest in the medical out-patient department of the university hospital and found there some unusually able and receptive aids, particularly William A. Edwards and M. Howard Fussell. Although the latter would have made his mark under any circumstances, Osler quickly directed him to definite methods of clinical investigation, and the association was most profitable to both. On account of the limited number of medical cases in the wards, clinical material for Dr. Osler's weekly Clinical Conference had to be drawn largely from the dispensary, and Fussell's service was assigned to Osler. The patients were well selected and thoroughly worked up, and Osler's presentation and comments were always good. Some idea of the primitive conditions appear from the fact that the laboratory of the out-patient department consisted of a microscope without a substage or oil immersion lens, so that hyaline casts or tubercle bacilli could not be seen, and a couple of reagent bottles, test tubes and an alcohol lamp. Osler put his own Zeiss microscope at the service of the staff, the same microscope that began the work of the clinical laboratory at the Hopkins Hospital five years later. In the conferences Osler made the anatomic conditions most prominent. The organs of clinical cases that came to autopsy were always demonstrated, with reference not only to anatomic and

etiological relations but also to physical signs, symptoms and therapy.

From the beginning Osler showed the same clear and direct method of presentation, the same conversational tone that became so well known in a few years. It was interesting to see that although he often expressed his admiration at Pepper's "silver tongued" lectures, he cultivated his own method. The literary allusions so familiar in later published works were rarely used, though they were rich and varied in familiar conversation. Sir Thomas Browne, Milton, Keats, Shelley, Browning and Jowett's Plato found a new and sometimes puzzled audience.

Osler also took a share in the "ward class" exercises, introduced a few years earlier. These were really demonstrations, in which members of groups might at times hear a heart murmur or a lung sign. It was not possible up to the time he left Philadelphia for Osler to offer more extensive clinical practice, but he did give, with the assistance of recent graduates who understood the value of his methods, more objective and individual work than had been possible before. The laboratory Dr. Osler and Dr. Musser equipped in 1887, at their own expense, was not large enough to be used by undergraduates.

Finding so little material in the university hospital, Osler quickly made himself familiar with all the opportunities in other institutions. His wide knowledge, unbounded energy and enthusiasm and unselfishness made him welcome, and the use he made of the material appeared in many papers and addresses, such as the work on chorea, based largely on his experience in the congenial "Infirmary for Diseases of the Nervous System", with its fine staff headed by S. Weir Mitchell. Many contributions by young physicians all over the city at that time were directly suggested and often planned by Dr. Osler.

It was perhaps in the "Outwards" of "Blockley," the municipal hospital, only a few minutes' walk from the University, that Osler was most happy. There he had a large material of the richest kind, from cretinism and birth palsy to vascular and neurologic diseases, and including typhoid fever, malaria, tuberculosis, pneumonia, and the acute exanthemata (except smallpox, in which Osler continued his interest).

He made a characteristic improvement in the Blockley service. Formerly it was three months. He got the men whose

terms preceded or followed his to divide the beds and double the time, so that each one had quite as many patients as he could study and followed them twice as long. Such was the spirit in the staff that he was asked to see every interesting case in all the services. The facilities were in many respects primitive. There were no ward laboratories. In examining fresh blood for malaria we had to take our microscopes and have them inspected by the gate-keeper going in and coming out. Specimens, such as sputum, had to undergo a similar inspection.

Fortunately for us, it happened that at that time the autopsy service was neglected by the staff and for months most of the sections were made by Osler and his assistants, all taking part in the writing of protocols and the selection of material for microscopic sections. As typhoid was frequent and deadly, the fullness of Osler's knowledge of the disease in all phases was demonstrated to us daily.

It was often interesting to me in after years to hear Osler spoken of as a man without laboratory experience. In fact he was unusually expert in all anatomic and histologic technic then available, was dexterous and accurate and had a quick and certain eye. He used to spend hours at a time working in the wards and in the dead-house, so many in fact that we often made our lunch in the wards on crackers and milk, not infrequently getting acute poisoning in consequence.

Osler was a regular attendant at the meetings of the Pathological Society. At each meeting he presented several specimens with suggestive remarks, had others present specimens at his suggestion, and his discussions of papers or demonstrations set a new and high standard of helpful criticism, urbanity and generosity. One evening as we were going together to a meeting we met a young and active gynecologist swinging a tin pail, saying "I got 'em" and adding he was going to show "them" at the "Path". Osler could not wait, but opened the pail and looked at the specimens. Seeing the supposed cystic ovaries were cystic kidneys he gave such a look as only he could give, quizzical and sympathetic, showed the renal landmarks, and the demonstration ended there.

Osler's manner with undergraduates was always kind, helpful and stimulating. His tolerance for dullness or stupidity often surprised or even shocked some of us and showed us that he really

"loved his fellow man". There was one pretty certain index to his feeling for others. I never knew him to say harsh things about anyone, but if he did not chaff one or play practical jokes on him, that man was pretty certain to be inferior.

As a museum builder in those days Osler was most unfortunate. Times were hard and it was impossible to buy glassware for even the rarest hearts or brains. This once led to a demonstration of the equanimity Osler so eloquently advocated and so perfectly illustrated in his life. To eke out jars for temporary use he would "lift" from the wards specimens of a familiar vessel he called a "Jerry". One Saturday afternoon the superintendent prowling in the laboratory came across a row of these on the shelves and did so successful a job of housecleaning that some of the best specimens of coronary disease and porencephaly were forever lost.

Osler differed from almost all clinical teachers at that time in the fact that he did not dictate or put on the blackboard any of the polypharmaceutical prescriptions then in vogue. Largely for that reason, I think, he was spoken of by some as a therapeutic nihilist. Yet as early as 1886 he read a paper on arsenic that showed a careful study of cases, as well as of the literature and in which he expressed the soundest view on the use of drugs and their study. The first edition of the text-book gave evidence in every section of the sagacious therapeutist, so that one can realize he had been just as attentive to the therapeutic as he had been to the anatomical side so well preserved in the Reports from the Montreal General Hospital.

Osler's Philadelphia years were of inestimable value to the university and profession there. They were valuable to him in many respects, as all who study his life can understand.

WILLIAM OSLER AS A TEACHER AND CLINICIAN IN PHILADELPHIA

Hobart Amory Hare, M.D.

Philadelphia

THE theme "Osler as a Clinician and Teacher" might well be divided among several writers, each one of whom could readily find material for a long contribution, for Osler did not teach

medicine alone, even in all its parts. He taught medical men to love the literature of the profession as well as the highest type of general literature, and so he taught us culture, and that the wearied mind could find comfort, sustenance, and inspiration in paths wherein we had not trod in this workaday world. His love of the Fathers in Medicine served to teach us that we should learn what they did before we boast of what we do, and his unusual knowledge of classical literature was utilized to charm us as we laboured. Always faithful to the cause to which he had devoted his life, he never left it so far that one forgot he was a doctor of physic; but he led us from the dry fields of exact science, when the spirit moved him, into the tropical verdure of cognate things, now touching the humanities, now placing before us a mental feast that satisfied the soul and made us better men.

For this reason, and because it was in this city that he developed fully, or rather where his development had an opportunity to expand to its full possibilities, I shall deal with him as a clinician and teacher *in Philadelphia.* Teaching the so-called Institutes of Medicine in Montreal, he was, nevertheless, even there, a bedside clinician, but his knowledge of the Institutes gained there formed a foundation on which we saw him place his early superstructure. Here his house was completed, and in it he stored his Lares and Penates in the form of the friendship of great men, a large hospital experience, and special training as a teacher at the bedside.

William Osler came to Philadelphia in the fall of 1884, the year of my graduation, and his arrival created the keenest interest among all medical men hereabouts because he was, to use a political phrase, "a dark horse." Alfred Stillé had offered his resignation from the chair of Practice of Medicine in the University of Pennsylvania in 1879, and had been persuaded much against his will to continue another five years.

As the year 1884 began, it became evident that the then Professor of Clinical Medicine, William Pepper 2nd., would succeed Stillé, and a lively canvass on the part of several junior teachers was begun for Pepper's place. In the meantime, however, the matter was settled by the Faculty offering the Chair to William Osler, who was well known in Philadelphia through his constant contributions to the *Medical News* and other Journals, and whose reputation as a teacher and original investigator had reached

the knowledge of those at the helm in the University. The letter containing the invitation to this post written by the late Professor James Tyson, then Dean of the University Faculty of Medicine, reached Montreal shortly after Osler's departure for Europe and was forwarded to him by his friend Dr. Shepherd. Shortly after its despatch, the late Horatio C. Wood, another member of the Faculty, feeling some skepticism as to the truth of the glowing accounts of the young Canadian's fitness for the high office that was to be filled, went to Montreal, determined, as a personal matter, to ascertain the facts for himself. A day was spent by him, *incog.*, at the French and English hospitals, at all of which Osler was equally a familiar figure, and it satisfied him so completely, that he returned to Philadelphia convinced, from the tributes he had heard on all sides, that the Faculty's choice was the right one. And it may truly be said that never in its history did the University act so wisely. Indeed, it acted more wisely than Osler's warmest admirers dreamt of. For he came to Philadelphia at a difficult time, when medical education was undergoing more radical changes than ever before or since, and many professional, financial, educational, and developmental problems awaited solution. Under such conditions many a man would have proved a misfit even if possessed of brilliant parts. His arrival spelt the doom of the ambitions of a number of medical clinicians by no means unworthy; it meant that Pepper with all his brilliancy was to find a foeman worthy of his steel in the faculty and as a teacher, and that the element that was for great changes in teaching was fortified.*

The remarkable part of Osler's entrance was that, while the report of his election raised waves of regret and indignation, his actual plunge in the pond at once had the effect of making its surface placid, and this without there being any manifest effort on his part to ingratiate himself with any one or all of the factions. He entered so gracefully and ably and so naturally that he seemed almost at once to be one of us, young and old. He was gracious to his elders, cordial to his contemporaries, encouraging to his juniors, and jovial almost to the point of frivolity with all, but the dominant factor, that made his way successful with all hands, was, to use a student phrase, "he was up,"—that is he knew his subject

*For further details on the medical conditions in Philadelphia at this time, see "William Osler as a Clinician and Teacher," by Hobart Amory Hare, *Therapeutic Gazette*, March, 1920.

and knew how to teach what he knew, and no one knew a subject better than he did when a show-down of knowledge was to be made. He took an active part, not only in University matters, but in all the medical societies that tended to research, and he never spoke without impressing his hearers with his familiarity with his topic. All these facts explain how it was that he won his way so rapidly with the medical men associated with him as well as with the students.

His first ward class was an eye-opener. In it he fairly frolicked in enthusiastic delight, and in a few moments had every man intensely interested and avid for more. Every new specimen that he came to at autopsy, and every interesting manifestation of disease in the living, was to him a treasure, and just as Leidy saw in every flower and stone, and bone, and worm, and rhizopod, an inner beauty, so Osler, to change my metaphor, was as the light-hearted child who, finding a field of daisies, shouts his delight so exultingly that all the other children become interested and gleefully shout with him.

Osler did more than any other man of his day in this city to teach all men that the study and cure of disease is a pursuit which a properly trained mind can follow with as keen enjoyment and uplift as an artist can study great pictures or a musician can hear great masters. Before Osler came, the student was prone to regard cancer as a cancer; when Osler left, the student studied it as an aggregation of cells possessing untold mysteries to be unravelled, and this is the more remarkable because while he went into the post-mortem room with the joyous demeanour of the youthful Sophocles leading the chorus of victory after the battle of Salamis, he cared little and admitted he knew less, as to how the victory could perhaps have been reached by proper treatment before death took place. This lack of interest in therapy may be said to have been the one weak spot in Osler's otherwise perfectly rounded out medical qualities. He joyously quoted the remarks of a colleague that "Osler's therapy consisted in Hope and nux vomica."

Referring once more to the period at which Osler came here, let me point out that any attempt at original study or research was almost unknown, at least among the younger men. Osler's enthusiasm soon made an opening, and almost within a month of his arrival he had rigged up a small clinical laboratory, under a

part of the hospital amphitheatre, and there, amid surroundings so discouraging as to foil the novice, he produced an atmosphere so encouraging and helpful that young fellows trooped to his side. It was as if Beethoven were playing in a hovel. What mattered it, if the Master played, in each case the physical surroundings served only to emphasize the brilliancy of the central figure. And so it may be said that Osler, on entering Philadelphia, carried the torch of original research in clinical medicine, and every now and again touched unlit torches that only needed his hand to make them burn, torches which have happily been carried into many distant parts, each lighting other torches, until like sacred flames they never die, but multiply. A multitude now exist, some of which are known as torches which he lit, and others, though burning brightly, wot not the source of their living fire.

Osler, therefore, developed the creed of original study, not only here, but everywhere his apostles migrated. He found a field fertile but unsown, and he raised a harvest that not only reseeds itself here but with each additional year scatters its grain in ever-widening fertile fields. Indeed, it may be said that it has long since ceased to be a matter of seeding but rather one of catalysis. Even though he is gone, the living particles of enthusiasm are converting many a low metal into a true gold; and no man whose metal was not pewter did not become the brighter for this Midas touch.

A very remarkable fact is that whatever Osler did he never lacked an inner dignity that even the most frivolous conduct could not efface.

I remember on one occasion in Washington, during the first meeting of the Association of American Physicians, with headquarters at Wormley's Hotel, I was asked by a reporter to tell him about the great men in attendance. I was there only as a medical youngster and referred him to Osler, who took him to the breakfast-room door. In a far-off corner sat a distant relative of mine, Dr. Francis Delafield, a great consultant in New York and by no means jovial or frivolous. The reporter was told that this somewhat aged man was devoted to baseball as a player, that he could not find time to play with regular teams, so he got groups of street urchins to play the game with him on vacant lots, and all of this appeared in cold type the next morning. Delafield was not pleased. I never knew if he knew who was the guilty one, but I

do know that in later years he was one of Osler's warmest friends and admirers.

It may be asked, Why, when discussing Osler as a clinician and teacher, do you bring in these outbursts of youth? I have brought them in because they serve to show a buoyancy of spirit that could not be submerged. Combined with his other qualities they served to tell every man that he possessed all good human attributes. Unconsciously we learned that enthusiasm could be controlled by judgment, light-heartedness by thought, buoyancy by ballast, and last of all, grief by serenity and the thought of others.

It was not out of place, that after his death, the oldest medical body on this continent, the College of Physicians of Philadelphia, should have set aside an evening for the consideration of the sterling qualities of one of their most distinguished Fellows, William Osler. For Osler went about doing good; he taught us, as Robert Louis Stevenson said, that "it is better to travel happily than to arrive," and although absent from our halls these many years it may be truly said that his spirit never left us and that while we live and while the College lives, it will continue to exert upon the whole of American medicine a goodly influence.

Those of us who knew Osler, still feel the glow of his personality, and those that did not, nevertheless bask in that same sunshine, the sunshine of high ideals, of noble thoughts, of gentleness and kindness, of firmness for the right, of love of one's fellowmen, and, not least, the love of that profession of medicine which he so gracefully adorned and at whose shrine he placed his noble qualities and his faithful service.

When the most cruel blow to mortal man was given him in the death of his only son in the war, he taught us that to be brave when bravery seems impossible is true courage. He taught us in life to be glad, in sorrow to be brave, and he left behind him what few men leave—the happiness of a great friendship, the exaltation of a great spirit, and the stimulus of a noble life. To quote Kipling's verse:

"He scarce had need to doff his pride
Or slough the dross of earth
E'en as he trod that day to God
So walked he from his birth,
In happiness and in gentleness,
In honour and clean mirth."

PERSONAL REMINISCENCE

JOSEPH LEIDY, M.D., 2ND

Philadelphia

SIR WILLIAM OSLER was appointed to the Chair of Clinical Medicine at the University of Pennsylvania in 1884.

His reputation as a teacher and keen pathologist had preceded him. The students were on the *qui vive* to attend his Introductory Lecture, and were not disappointed, though his manner, address and hesitancy of speech, which later actually became a great force, were viewed with some misgivings; whatever may have been the effect of these impressions it was soon lost upon the student-body through his rare ability of imparting knowledge, which left an indelible impression upon the student's mind. Philadelphia was noted for her great clinical teachers, to mention only William Pepper and J. M. Da Costa, whose rare gift of language and complete mastery of their subject made them, as examples for comparison, names to conjure with. What impressed us most was that no matter how fatigued the student, or uninteresting the subject under discussion,—no man ever left Osler's clinic without feeling something gained, something of outstanding interest and importance was carried away—the attribute of a great teacher.

By comparison with all others we felt that here was a man well worth while. Little we could afford to lose, for the words that fell from his lips were pearls of wisdom. He was an inspiration, with the faculty of exciting the best in others, and an infinite capacity for taking pains, the true measure of great genius.

William Osler came to us not only as a great teacher, but as a great investigator; he delved into the mysteries of pathology; imbued as he was with the teachings of Virchow and his followers in the clinics of Berlin and Vienna, he gave evidence immediately of an accomplished pathologist.

His popularity soon radiated among his students and internes, indeed, whoever came to know him, whoever came within his vision never failed to recognize his lovable nature; whoever came under his influence, felt the better for it: there was a magnetism

which permeated our very being,—and even now, as I write of him as he appeared thirty-five years ago, these recollections are as vivid as though they were but the events of yesterday. I need not refer to the respect which all accorded him—jovial and jocular as he was—somehow we all knew the limit which we were permitted to go. There was no mawkish sentiment, but a transparent sincerity, a love of truth, and a desire to encourage us to do better work. His demonstrations, keen, sharply defined, never left us groping in the dark,—founded as they were upon the knowledge of pathology—I really think his greatest love, and his field of research.

In diagnosis he reached his conclusions after a rigid analysis, —there was no "snap" diagnosis in Osler's clinic. Well do I remember upon an occasion as a group of the hospital staff stood about the bedside of a case in the Neurological ward, the patient being examined by a brilliant physiologist and able investigator in nervous diseases, Horatio C. Wood, who frequently, to stimulate the students' powers of observation would suddenly turn with, —"Mr. B., what is your diagnosis in this case?"—(a diagnosis which would frequently be analyzed later to the student's chagrin); this form of quizzing had its advantages, but it was not the Oslerian method. Professor Wood, observing Osler passing through the ward, suddenly hailed him with "Hello! Osler— What is your diagnosis in this case?" Osler stopped, looked seriously at the patient for a moment, as if in deep meditation— then, with a merry twinkle in his eye, turned and said "Ah, Wood, wonderful! wonderful! are the affections of the human frame, goodbye, Wood." And passed rapidly on his way to the amusement of his hearers.

While he impressed us from the very first as a great clinical teacher and leader, it seems to me it was in the autopsy room that Osler showed his great brilliancy to his internes and his profound knowledge of pathology. Philadelphia was then in the throes of a typhoid epidemic in its most protean aspects; even Murchison would have marvelled could he have studied the richness of the material afforded the young pathologist in those years. Osler was in his element; his enthusiasm knew no bounds; it extended to his internes, who awaited with eagerness the coming of the Chief, and many were the hours we spent in close contact, puzzling over the problems for solution, for there was always something new.

At an autopsy upon a case of multiple infarcts of the spleen and kidneys we had seacrhed for the focus of infection without avail; Osler turned suddenly to one of us, "You reprobate; you never opened the tympanum." The tympanic plate was quickly removed from the petrosa and exposed an abscess in the middle ear. Upon another occasion a case of melanotic sarcoma of the liver and skin baffled us for a time, when Osler called out, "You never examined that choroid membrane." Within the eyeball was defined a melanotic sarcoma the size of a pea, attached to the choroid. In the course of the autopsy I happened to scratch my finger; Osler saw me stop and, quickly looking up, he called in a cheery voice,—"Scratch yourself? Oh! Leidy, who succeeds you?"

Whoever saw Osler dissect a heart exposing the mitral and tricuspid valves with their cusps and delicate chordae tendineae, never failed to be impressed with his skill in dissection at the autopsy table; or a dissection of the brain in the case of a central lesion, the separation of the hemispheres, the longitudinal incisions through the corpus callosum exposing the horns of the lateral ventricles, the nuclei and various capsules, preparations in beauty not to be surpassed by the skill of the ablest dissectors in any laboratory. From these cases of gross pathological dissections he would turn to the microscope. Here one viewed the lover of scientific research at first hand, then it was he was at work upon the hematazoa malariae. What an inspiration he was to us all. No one could resist it—Packard—Westcott—Laine, and many another.

Only once I saw him apparently crestfallen, at other times he so masked his feelings that one often failed to read his thoughts. He had left Philadelphia for the night; a patient was admitted to the ward, off ship-board, from the swamps of South Carolina, with all the symptoms of pernicious malaria. The blood was teeming with the various forms of the plasmodia and many ciliated bodies; we had been waiting weeks for such a case. The patient was in a desperate condition and after due consultation with the Staff, it was deemed wise to administer large doses of quinine a la Osler, 10 grains every hour for six doses. I passed a restless night, for I was prepared to be anathematized the next day—the rule of the ward was in malaria to hold off all quinine until the patient was seen by the Chief. The next day, as Osler

entered the ward, I broke the news gently to him. He looked crestfallen, took me by the arm and as he left the ward, said, "Ah! Leidy, your patient is better, but you have broken my heart; I have waited six months for those gregarinal forms!" I must have looked pretty badly, for he suddenly turned, saying "Let us get a drop of his blood at any rate." We went to his laboratory, a room set aside under the old amphitheatre, the slide was placed under the microscope, Osler moved it slowly when suddenly, in an outburst of enthusiasm, "Bless my soul, Dock!", turning to Professor George Dock, now of St. Louis, who was assisting him in his pathological researches, "Look at that slide." There were seen beautiful gregarinal forms with cilia sweeping the centre of the field. Turning to me, he said, "Ah! Leidy, you are not as great a reprobate as I thought." So all was well.

He came in to the hospital one day and said, "Collect all the chronic heart cases who apply for admission to hospital, especially those with secondary symptoms. Let us see what results are to be obtained from absolute rest, no medicine but our usual *placebo*" (Compound Tr. Cardamon). In a short time we had some fourteen cases under observation, presenting a variety of secondary symptoms,—oedema of the lower extremities, pulmonary oedema, bronchitis, dyspnoea, etc., etc. Improvement was noted from the beginning, and some weeks later it was decided to utilize a group of the cases for class demonstration. At the first clinic Dr. William Pepper (Professor of Medicine) appeared at the door of the amphitheatre with two elderly physicians who were introduced to Dr. Osler; one I think was the oldest living graduate of the Medical Department of the University, who was visiting his Alma Mater for the first time in many years. Osler directed them to seats of honour in the front of the arena. The lecture began, and was followed in rapt attention by the students and the two patriarchal alumni. Osler dilated at great length upon the importance of absolute rest in bed,—the bed-pan imperative, and then, with a merry twinkle in his eye, "Gentlemen, now as to therapeutics, we will continue with—mm—mm—Comp. Tinct. Cardamon, five drops t.i.d.," hesitating between each word. With that the two alumni took out their note-books and recorded Osler's specific for chronic heart disease. After the clinic I said, "Doctor, that was a cruel shame, as the darkies say, to allow those men to leave without

further explanation; they will be prescribing Tr. Cardamon to all their heart cases." "Ah! Leidy, bless your soul, think how many lives will be saved; only, *only* think of the deaths from the indiscriminate use of Digitalis!"

Osler had little confidence in drugs. I never knew a greater skeptic. Sometimes I would venture to ask whether he thought this or that drug was of value. He would slap me on the back. "Ah! you must be reading Fothergill's *Handbook on Treatment.*" He had seen a copy on my table and I had to confess it was true. Another time he said, "Well, my dear fellow, if it will ease your mind a bit, put on a poultice."

A good deal of criticism has been made of Dr. Osler's skepticism in therapeutics; he looked upon drugs in many instances as double-edged swords. Those who followed his treatment, however, learned to know it was *sound;* certainly those of us in hospital who were confined to his limited therapeutic armamentarium, will attest to its efficacy, with results the equal of any attained by his severe critics.

When William Osler left Philadelphia, a void remained which will never be filled by man incarnate. There was a sadness about his going to which he was not unwilling to give expression to some of his intimates. I believe that deep down in his heart he never really wished to leave this, his first new-made home in the States, as he was wont to refer to us. More than once I have heard his regret, "Do you know, no Pathological Society in the world, not even London, presents the variety of interesting material for pathological research as does the Philadelphia Society." Was this the food he craved—for further research into the mysteries of pathology?

These few words written in a reminiscent mood, of a great teacher and intimate friend, present but a faint outline of the man as we knew him in the flesh. It was my very good fortune to have sat at his feet as a student, to have served as his interne at the University Hospital, to have known him as an intimate in my Father's and my Uncle's homes, they his most cherished admirers. Later, when I was Resident Interne in the Pennsylvania Hospital at the time of his departure for Baltimore, I received a telegram urging me to visit him at Johns Hopkins, when he did me the honour to offer me the post of assistant, but cruel fate stepped in and decided otherwise,—"*Sic itur ad astra.*"

Student Reminiscences—Philadelphia Period

EDITORIAL NOTE.—The following communications, which have been kindly sent us in response to the request circulated, are not, as in the Montreal period, from men who merely sat with or under Dr. Osler as undergraduates. In this more advanced period of his professional career, these reminiscences are from those who served under him as his Internes or as his Junior Associates on the Teaching Staff of the University of Pennsylvania and who thus came still more intimately within the zone of his personal influence. In this connection see also the preceding articles by Drs. Dock and Hare.

Osler in Philadelphia.

DURING the interim following the resignation of Professor Alfred Stillé from the chair of Didactic Medicine in the University of Pennsylvania and the appointment of William Pepper to the chair, there followed a vacancy in the chair of Clinical Medicine which was later filled by the selection of William Osler.

During this time, we of the Junior Staff carried on the teaching work and well do I remember Osler's first appearance upon the scene.

We had in those days, in addition to section teaching, a meeting once a month with the whole class, which was larger then than now. About in the middle of my talk a young man, slight, dark, well set up, walked into the amphitheatre and sat just behind me until the class was dismissed, then walking toward me with extended hand said, "I am Osler." This was a bit disconcerting and I well remember replying, "Why in the name of Heaven did you not say so when you came into the room?"

Thus started a warm friendship which extended through all the years, indeed, I received a personal letter from him from England which arrived in Los Angeles after the sad tidings of his death had been announced.

Osler soon endeared himself to all of us by his unfailing good natured kindness and the apparent interest that he took in us and our work.

During a long and trying illness that came to me, lasting from February until December, about a year, Osler practically never failed to call at the house daily and spend some time at my bedside; these calls would be at irregular hours, sometimes early in the morning before his day started or late at night after the work was over, but he always came, often in his evening clothes, and telling me of men and things, and medical affairs that kept a sick man *au courant*.

We often talked of his future plans and desires, and after his removal to Hopkins and my exodus to California, the frequent visits to Philadelphia and Baltimore renewed our companionship and camaraderie. During one of these visits the offer to go to Edinburgh came to him, and we had a long and frank discussion about it, my feeling, freely expressed, was that he should wait and London would come to him, which it did shortly after and made him very happy, feeling as he expressed it to me that as a British subject he would like to round out his career in England.

It was, I think, in 1884, after returning from a trip to England, that he handed me a stethoscope, saying that he got it at Hawksley's, London, and wished me to use it with the class and see what sort of a reception it

would have. It at once became popular and well liked. I published a description of it, with cut, in the *Medical News*, of Philadelphia, calling it the "University Stethoscope"* and had one of the surgical instrument houses make it in quantity for the student primarily but it was speedily adopted by the general profession.

I am unable to say after the lapse of so many years whether the instrument was made for Osler from his suggestions or whether he simply purchased it at Hawksley's instrument shop. In any event, there is no doubt that Osler in 1884 introduced to the United States the type of stethoscope that is now universally used in this country.

Los Angeles, California *William A. Edwards, M.D., F.A.C.S.*

* * *

Some Personal Reminiscences of Sir William Osler in Philadelphia.

THE announcement of Dr. Osler's election to the professorship of clinical medicine at the University of Pennsylvania was received by the students with very mixed feelings. A small group, the congenitally parochially minded, whose intellectual universe always is walled in by prejudice and littleness, who have mental myopia, but who yet within their limits think, and think intensely, were not pleased: from their point of view, only graduates of the university deserved positions on its teaching staff, and to elect a foreigner was equivalent to saying that foreigners were better men than Americans—an impossible thing. The more broad-minded and intellectually virile group were much pleased, believing a great university should choose, from the whole world, the best men for its professors. The great mass of ingenuous youths, who always make up the larger part of any student body, did not think about the matter, had no opinion, but accepted what the trustees gave them with the happy carelessness of thoughtless adolescence.

Osler very soon gained the respect of all students and the affection of many. This was not on account of any endeavour on his part to make himself popular, and was in spite of a very poor delivery in his lectures. He had a halting speech, which certain cynical youths, and some older people too, said was a pure affectation, which he had consciously and purposely copied while in England. But very soon we forgot all about his manner of speech and realized that he was a man tremendously interested in medicine as a natural science, a man determined to learn all about diseases; indeed in our opinion he already knew pretty much all that was knowable, and wished most earnestly to make us interested in learning for ourselves. His clinical lectures were not really lectures on one given subject, but a demonstration of individual signs and symptoms present in the patient and important in the disease. In ward class, he studied the students and used his impish tricks to test them. For example, he would ask a student if he heard a certain murmur and on being answered yes, as of course he usually was, would say "but I do not" and then smile quizzically. He was a tremendous intellectual stimulant, and made us perceive what we saw and get pleasure from perceiving. He created in us a liking

*A New Binaural Stethoscope. By Wm. A. Edwards, M.D., 1st Asst. Demonstrator of Clinical Medicine, University of Pennsylvania, Medical Registrar, Philadelphia Hospital. *Med. News, Phila.*, 1885, XLVII, 527, 528.

for pathology. We had been taught morbid anatomy as an abstract science, separate and apart from medicine: he taught us to tie up clinical symptoms with post mortem findings. He always made an autopsy whenever possible and demonstrated specimens to us. This made us have firm faith in his intellectual honesty, because he showed us the specimens not only when his clinical diagnosis was right, but also when it was wrong, which happened sometimes, notwithstanding our belief in his infallibility. Most important of all, he was a very human man, a close student of students, very sympathetic with every ambitious youth who had a mind, and honest enough not to pat a fool on the back and tell him what a good fellow he was. Not always gently, he let him know nature did not mean him to be a physician. He liked young people and this continued till death. He was always on the look-out for bright students and gave them encouragement, but he did not believe that silk purses could be made out of sows' ears, or that protoplasmic mush could acquire intellect.

During my undergraduate days, I had no very close relations with him save that I seized every opportunity, at odd times, to see him make autopsies at Blockley and frequently asked advice about reading. When I became an applicant for the position of resident physician at the Orthopaedic Hospital and Infirmary for Nervous Diseases, I went to see him at his lodgings and office on Fifteenth street near Chestnut and was more struck by the disorder of his rooms than by any thing else. Books, pamphlets and manuscripts were everywhere. They were not all medical: literature had its place. His desk was in indescribable confusion. To the unobservant there was an air of lack of wealth, to the observant it was clear the user of that office did not care a rap about externals and was not trying to hoodwink the public by brassware and showy furniture, but was thinking only of science and men. He already knew I was interested in nervous diseases and assured me that, as far as he was concerned, I had the place. Then the impish spirit, which never deserted him, came to the surface and he asked me if I had read Meynert's Psychiatry. I answered "No." He said, "You can never be a neurologist till you have studied and mastered the book, here is a copy, take it, read it, come to see me in a month." That night I began the reading. The first few pages were easy enough. It began with a description of the amphioxus, which, since the animal has almost no nervous system, could not be made obscure. But after reading some pages, I started to think out what I had read. I could not repeat the book's argument. I read again, and again started to think it out. Again I balked. I was in despair. If one had to understand the confounded book to be a neurologist, nature never meant me to be a neurologist. Hopeless, I returned to Osler and said, "Doctor, I can never be a neurologist." "Why?" "I can not comprehend Meynert." "Do not let that worry you. Nobody else can." All this with a merry twinkle. I became resident at the Infirmary and later, a neurologist. During my term there, from July, 1887, till July, 1888, he prepared his two books on chorea and cerebral palsies of children. I assisted him in writing up histories and keeping running notes of examinations of the patients. He used to come to the hospital in the evenings and we would go over the histories together. Every child with St. Vitus dance, and there were a great many in the clinic, was thoroughly examined. Their hearts especially were gone over every week. He had an out-patient clinic one day each week, which he attended himself. The other two clinics were held by S. Weir Mitchell and Wharton Sinkler. I do not

think there is any other hospital in Philadelphia in which the visiting physicians actually attend the out-patient department regularly.

Osler had one defect as a chief. He neither knew anything about, nor cared anything for, therapeutics. He depended on rest, exercise, diet and quiet, digitalis, opium, iodide, and mercury and, above all, nature's medicine, time. Worse than this the average resident came out of his hands having absorbed an attitude of contempt toward all methods of healing the sick. At the Infirmary one had the powerful antidote of Weir Mitchell. Internes in other hospitals were not as fortunate.

His therapeutic nihilism, as well as his impishness, is illustrated by the following incident. He sent an ill-tempered, not too well bred, silly and neurasthenic lady to the hospital with a note to me saying, "Put Mrs. Blank on rest cure." I, being saturated with Weir Mitchell's ideas and being used to obeying orders, prescribed bed, absolute milk diet, isolation, massage and Faradism, as well as a little medicine. Next day when he came to the hospital I suggested he see her, because she was already getting restless and evidently regarded me as a sort of lower, not upper, servant. He would not see her but said, "Let us go examine the man in the ward who showed that interesting saddle-shaped anaesthesia around the perinaeum. He must have disease in his cauda equina. Have you tried his temperature sense?" We spent a long time in the wards and he left the hospital. He did not return for two days and even then would not see the private patient. (I may say parenthetically he had very little private practice at this time and indeed made no attempt to get a clientele. All he wanted was an occasional consultation, and he got all the consultations he would bother with.) Finally, after a week the neurasthenic woman had gotten so on my nerves that I could stand it no longer. She abused me and the nurses and everybody and I told him he must see her. He went dancing into the room, eyes sparkling, looking impish, and asked her how the house doctor was treating her. She broke out, I was starving her, feeding her on milk. Whereupon he, "Burr, give the poor woman food, milk is for babes." She, "And, Dr. Osler, he won't even allow my husband to see me." Osler, turning to me and smiling quizzically, "Burr, never separate man and wife." This went on for several minutes. Had I not loved him with the love of a young hero-worshipper, I would have hated him, but I did not. I forgave him all. The poor woman left the hospital, returned months after under Mitchell, I still being interne, and was cured. His fondness for practical jokes is illustrated by the following which led to tears from a defenceless woman. The superintendent of the hospital was a high-strung young woman, with much suppressed emotion, who worshipped him from afar, with an adoration suitable to be offered to the gods. He probably had no opinion about her of any kind, but knew she prided herself on the immaculate cleanness of the hospital. One day he asked me where he could get a skewer and some cobwebs. Somewhat astonished, because I could think of no possible relation between the two things, could not in the wildest stretches of my not too imaginative soul, see how two such antipathetic things as skewers and cobwebs could be brought to any common use, unless, indeed, he had altogether taken leave of his therapeutic senses and purposed to heal a cut by cobwebs, said "I will get a skewer from the kitchen, but," and this with considerable pride in the cleanness of the house, "there are no cobwebs here." I got the skewer. He said, "Let's go to the cellar." We went and he searched. Finally he found a web in one of the dark

recesses of the coal cellar. He wrapped it round the skewer and we marched upstairs, he waving the dirty thing in front of him. We confronted the superintendent, she being in blissful ignorance of our expedition. He, with a mock gravity, which she took seriously, said, "Miss Blank, you say this hospital is clean, look what I found on entering here to-day," and shook the dirty object in her face. On her part—tears. It took me several hours to convince her it was a joke.

I have purposely laid stress in this little paper, not on the serious side of Osler's life, but on the trifling and human. Let no one think I did not recognize and respect his serious side. I do and did. As I have said many times, to him and Weir Mitchell I owe more than to all other men, barring my father. But his very impishness of spirit was one of the charms of the man, and one of the qualities which enabled him to keep up the fight when, in his old age, the awful tragedy of war came into his very inmost life and took from him his son. Therefore it ought to be recorded.

Philadelphia *Charles W. Burr, M.D.,*
Professor of Mental Diseases,
University of Pennsylvania

Reminiscence

AT the time Dr. Osler came to the University of Pennsylvania, I was chief of Clinic to Dr. Horatio C. Wood, Clinical Professor of Diseases of the Nervous System.* Though very much younger than Dr. Wood, I was on close terms with him and familiar with the details of the visit which he paid to Montreal at the time when Dr. Osler was called to Philadelphia. Dr. Wood's account of his experiences in Montreal and especially of the information he elicited regarding Dr. Osler, excited in me many pleasurable anticipations, which, when Dr. Osler finally arrived in Philadelphia, were more than verified. Dr. Osler at once assumed an important and influential rôle in the faculty, but it was upon the younger teachers, like myself, and the student body, that he secured a special hold. He was, according to my recollection, about thirty-five years of age at the time.

In addition to the formal lectures which he gave and his attendance in the wards of the University Hospital, he also conducted his own outpatient department on clinical medicine. This department was on the side of the court-yard of the hospital, opposite to the neurological department of which I was myself in daily charge. Very soon a strong friendship sprang up between us and he not infrequently came over to our department. His visits were always stimulating to a degree, and myself and the various assistants always looked forward to his visits with a great deal of pleasure. The only fault we found was that these visits were too infrequent.

At this time Eadweard Muybridge, the distinguished student of animal locomotion, was conducting a remarkable series of investigations in an enclosure on the hospital grounds. Instantaneous photographs of men and animals in motion were made with an apparatus consisting of

* Dr. Wood was also Professor of Materia Medica and Therapeutics.

twenty-four cameras arranged in series, the exposures taking place successively at definite intervals of time. I induced Mr. Muybridge to photograph some of the patients of the Neurological Department as well as a number of patients from the great nervous wards of the Philadelphia General Hospital. While Dr. Osler was not directly concerned in these investigations, he evinced the liveliest interest in them, was frequently present, and when opportunity offered, sent patients from his own service. The Muybridge results were subsequently published in a very elaborate series of photographic plates and are especially memorable because they constituted the forerunners of the modern moving pictures.

Dr. Osler's activities embraced also a service at the Philadelphia General Hospital and another at the Orthopaedic Hospital and Infirmary for Nervous Diseases. His activities at the former were not confined to the Medical Wards, for he devoted a large portion of his time to the making of post-mortem examinations. At the latter he was always surrounded by a group of internes and younger medical men generally and, at times also, of course, by students. I have known him to make as many as seven autopsies in a single day. He was indefatigable, always enthusiastic and always inspiring. At the Orthopaedic Hospital, as is well known, he made important studies upon the clinical material and these later became the subjects of various monographs at his hands. I myself was connected in a junior capacity with the hospital and was a witness of his activity.

He also became a member of the Library Committee of the College of Physicians and here especially he was in his element, for he devoutly loved books. His judgment, his general and extensive knowledge of medical literature, past and present, and his knowledge of French and German stood the library in good stead. It has always been a source of pride and pleasure to myself that when he left Philadelphia for Baltimore, I had the honour of succeeding him upon the Committee.

He was of course very active in the various medical societies of Philadelphia. While he, generously, did not neglect the County Society, he was especially active in the Pathological Society, the College of Physicians and—I like to think—most of all in the Neurological Society.

His leaving Philadelphia to go to the Hopkins was a matter of very serious regret, a regret that was very personal with most of us. The future, however, showed that we had not lost him for he came to Philadelphia a great deal, keeping up his activities in the various societies and taking part in our various medical social functions. Philadelphia had evidently secured a hold upon him. Weir Mitchell, the spell of whose influence he felt very early after coming to Philadelphia, was always a great attraction to him, and also the College of Physicians, with whose interesting history and beautiful traditions he was thoroughly imbued and with which he was in warm sympathy. And he never forgot our library. Even after he left the Hopkins for England he frequently wrote to our Librarian, Mr. Fisher, and upon not a few occasions made us valuable and interesting gifts. The five years which he had spent in Philadelphia were evidently never forgotten by him and were memorable years to many of us here.

One of his characteristics was his encouragement of others. Very few papers were written by members of the younger group which, when of consequence, did not elicit his praise and commendation. His influence naturally was very great. This was due not only to the very unusual

character of his attainments, the broad biological foundation upon which his medical education had been built, and the accurate clinical and pathological knowledge he had acquired, but more than all to his personality. The latter was engaging and inspiring to a degree.

Philadelphia *Francis X. Dercum*

* * *

Sir William Osler's Sojourn in Philadelphia—Especially His Association with the Orthopaedic Hospital and Infirmary for Nervous Diseases in 1887-88-89.

IN the advent of William Osler to Philadelphia in response to the call of the University of Pennsylvania, new life was infused into the manner of teaching of medicine and research. The love of research was taught in a manner never before attempted. Unfortunately I saw but little of his method at this time, and it was not until 1887, when he was elected as one of the Physicians to the Philadelphia Orthopaedic Hospital and Infirmary, that I had the good fortune to be associated with him.

Part of the duty of the physician to the Hospital is to conduct the Dispensary on his day of service, beside the ordinary attendance on the Hospital, and on this day the young physicians who were connected with the Hospital collected to glean from his lucid manner of investigation of the patients brought before him, the nature of their ailment. Pathology was a strong point in these investigations.

Pathology and research were the two subjects that interested him most, and while at the Orthopaedic Hospital the study of the great wealth contained in the notes of the cases at the Dispensary gave him intense pleasure, and from these notes he gleaned much that has been of great benefit to the profession. His first publication emanating from the Hospital was on "Chorea" based upon the study of over 550 cases, recalling for this purpose many of the old patients, and several important points were brought forth, principally the fact that "endocarditis is a very common complication of Chorea Minor" and "that in a considerable proportion of the cases, much larger than had been hitherto supposed, the complicating endocarditis lays the foundation of organic heart disease." In fact the statement is credited to him that no disease, not even rheumatism, is so apt to be followed by endocarditis as chorea, and also "that there is no known disease in which endocarditis is so constantly found post-mortem as in chorea."

His second publication from the hospital was on "The Cerebral Palsies of Children." The individual cases are described and commented on and, where an autopsy could be obtained, the pathological conditions found were also described and commented on. It is needless to say that the investigation of the notes and cases prior to the compiling of these two publications was of much interest to the young practitioners who were fortunate enough to follow him. Dr. Osler endeared himself to all with whom he came in contact, not only by his gracious manner and his fund of humor, but also, as far as a physician was concerned, by his clear insight and interested manner of studying a given case, which stimulated all to imitate him. Therapy itself did not interest him, for it was the unearthing of unobserved symptoms and their importance in the study of a case that held his interest.

I remember most vividly a private case that shows the point that most attracted Dr. Osler's interest in a patient. My colleague and I had agreed as to the pathology and the large nervous element present, but thought it of sufficient importance to call him in consultation as to the pathology and treatment. When he called at the house he quickly agreed with us as to the pathology of the trouble and almost immediately lost all interest, and spent the rest of the time at the house in examining the books in the library, which was an unusually fine one. It is needless to say that the patient thought that sufficient study had not been paid to the treatment.

He always saw the ludicrous side of things, and his sense of humor added much to the pleasure of associating with him. One day while inspecting the Orthopaedic Hospital, he found, with great pleasure, a small cobweb in the basement; he pounced upon this, brought it up to the office on his finger, and made a serious complaint to the matron upon her poor housekeeping, and was amused that she had misunderstood the fact that he was only in fun.

William Osler was a born teacher, and began his teaching in Montreal, gaining a wide reputation as a writer as well as a teacher. After coming to Philadelphia, he improved in this respect, and when he went to Johns Hopkins in 1889 he had still further improved in ability and diction.

His time in Philadelphia was taken up with writing, teaching, hospital work and in consultation, but not in the ordinary work of the practicing physician.

He was known by all physicians of any note here, and when once he was known he was thereafter claimed as a friend, even after he left the City. His genial manner to his friends is shown by the following incident which occurred after he left Philadelphia.

One day while walking with my wife at Murray Bay, Canada, I met him driving with his wife. He joyously called out to me, addressing me by a name that would have been an insult from any other mouth than his, but was really meant as a term of affection, and was so understood by me, and insisted that we should adjourn to his house and partake of a picnic lunch, at which we helped ourselves to the edibles on the side table as the maids were all out that Sunday afternoon. We were made thoroughly at home with some of his friends.

The accompanying photograph* showing Osler at one of his Clinics in 1889 at the Orthopaedic Hospital and Infirmary is inserted here on account of the interest that is associated with it.

When in 1889 William Osler left Philadelphia to accept the position of Professor of Medicine at Johns Hopkins Hospital, Baltimore, we all felt that we had not only lost a dear friend, but that the profession in Philadelphia had lost a leading light. The Orthopaedic Hospital and Infirmary felt this most keenly, for although his stay had been short, the Institution considered that its work had never been better performed than when in his hands, and the Hospital believed that it had a right to be critical when it has had such men on its roll as S. Weir Mitchell on the medical side and Wm. W. Keen on the surgical, not to mention others of great merit. The Institution cannot but feel that it was the means of adding not a little to the luster of his fame.

Philadelphia should certainly have the credit of bringing Osler's talents as a teacher and pathologist to their full fruition.

Philadelphia, Pa. *Morris J. Lewis, M.D.*

*This picture is published opposite page 205. *Ed.*

Recollections of Sir William Osler

EDITORIAL NOTE.—In forwarding this reminiscence Dr. Toulmin related the following interesting incident about the circumstances of his appointment from the Philadelphia school as Junior Interne at the Johns Hopkins Hospital during the first year of Dr. Osler's service there.

"DURING my last year at Medical School, upon hearing of Osler's appointment as physician in charge of Johns Hopkins Hospital (to be effective I believe, in May, 1889), I summoned up an unusual amount of courage and presented myself at Osler's office and requested that he consider me for the position of Junior Interne, the position being open a few days after my graduation. He received me graciously, of course. He could not receive anyone in any other way. He asked me to make formal application in writing and to give some good reason why I should be selected. As I recall it, this was in December, 1888. From time to time I called upon him to ask if he had selected his Interne, and early in the spring he advised me to go to Baltimore to meet two or three other members of the Committee which would select the men for the various hospital positions, as the choice did not rest with him alone. I had reminded him that it was necessary for me to know if my application was acted upon either favourably or unfavourably, as in the latter case I wished to take the examination for Interneship in the Philadelphia Hospital.

'I think it must have been late in April or early in May when he sent for me and said:

"Toulmin, you have not been selected for Junior Interne on the Medical Staff of Johns Hopkins Hospital, but if you will personally see that my pathological specimens are safely removed from the University Hospital to Johns Hopkins in Baltimore, and that not one of these specimens is lost or a glass jar broken, I will let you stay at the Hospital in my service."

"This was the nearest announcement he ever made that I had been successful in my application.

"I saw the packing-cases containing his specimens safely stowed on the Philadelphia-Baltimore boat, accompanied them to Baltimore, saw them packed on a dray and proudly rode on top of one of them to the Hospital; and then followed the wonderful eighteen months of which I shall gladly give some impression in my contribution."

Having been a student in the Medical Department of the University of Pennsylvania from September, 1886, to my graduation in May, 1889, I at that time came under the influence of Sir William Osler,—then "Doctor" or "Professor" Osler,—attending his clinics at the University and Philadelphia Hospitals and in my last year his ward classes. It was, however, while I acted as his Junior Interne at Johns Hopkins Hospital from May, 1889, to October, 1890, that I really learned to know what an outstanding man he was. Ever since that wonderful year and a half, I have continued to appreciate more and more what a great opportunity was given me through that association.

Osler was always a teacher, at all times and under all circumstances; it is hardly necessary, therefore, to separate my recollections of him under the two periods mentioned. I recall, however, that to his students he laid particular stress on the necessity of methodically examining a patient, and especially of obtaining a full history of a case before beginning the physical examination. He impressed upon us that a correct diagnosis is the important factor—the treatment simple in comparison.

We did not learn the use of all of the drugs in the pharmacopeia from him. If my memory is correct, he thought we could get along quite satis-

factorily with six or eight drugs; while one of his favourite prescriptions was "Time in divided doses."

But if drugs were not given a prominent place, how rich were his clinics in all other features,—the history of disease, causes and effects; how clear and concise the deductions from the history and physical examination; how interesting was each case made by him; how beautiful his diction!

Osler lived in the Hospital during my service, as did nearly all the staff, and was the moving spirit of that very happy "family," both during the hours of work, of informal talks or meetings in the Library and of social gatherings. He was a prodigious worker and had an extraordinary faculty of inspiring his associates to do something worth while. He always gave encouragement and assistance to everyone who was working in the Ward or the Laboratory or in the Library, now suggesting a line of research, now a subject for critical review, now an unusual case to be studied and reported. His wide knowledge of subjects allied to medicine, of literature and languages, made his clinics, his ward demonstrations, his conversation always interesting and entertaining and often brilliant.

He was a man with a delightful personality, earnest but cheerful, light-hearted, sympathetic. When he entered a room or a ward, the effect was instantaneous and striking; everyone was eager to serve him and was responsive to his genial, cordial, helpful manner; and all felt the benefit of his mere presence, as a burst of sunshine following a dreary day brings hope and cheerfulness and encouragement.

He had, too, a delightful sense of humour. I remember on one occasion the Hospital authorities were thrown into a condition of consternation on learning that through an error, a "gentleman of colour," wearing clerical garb, was admitted to one of the private wards. I was assigned the pleasant duty of diplomatically getting him out of the hospital when I went to take his history. I soon discovered that he had been as white as any of us until a few weeks before his illness, which was some liver condition that had caused a most marked jaundice. Osler enjoyed the affair more than any one else and often in later years referred to the episode of the "coloured Episcopal minister."

While in no sense a surgeon, he took the deepest interest in the splendid work of Halsted and Kelly and showed fine appreciation of their accomplishments. He was, however, a great pathologist and naturally formed for Welch, with his brilliant researches and studies, his warmest friendship and deepest attachment.

A cultured gentleman, a profound scholar, an accomplished and versatile writer, an unexcelled teacher, an inspiring leader, our beloved "Chief,"—SIR WILLIAM OSLER.

Philadelphia *Harry Toulmin*

Personal Reminiscence extracted from a letter received in response to our request:

"I HAD the very great privilege of serving under Dr. Osler in the Hospital of the University of Pennsylvania, from October 1st, 1888, to March 31st, 1889, and also of some very pleasant visits subsequently

at his Baltimore home. My interneship under Dr. Osler was very much enjoyed at the time, and I have looked upon it almost as an epoch in my life. Dr. Osler was one of two members of our faculty from whom I received the greatest inspiration in medicine.

Philadelphia *Alfred C. Wood*

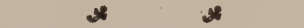
A Personal Reminiscence

IT was my good fortune during my interneship at the Philadelphia General Hospital, long known as Blockley, in the years 1885-1886, to see Dr. Osler, then a young man in the necropsy room, when some of my patients came to examination.

His wonderful personality showed in this work, as in all he did in his long and illustrious career.

His grasp of essentials, the accuracy of his judgments, and the perfection of his technique stand out in my memory as though it were but yesterday. I count it one of the treasures of life to have seen even a little of his work, and to have known, though slightly, such a Master in Medicine.

Elizabeth L. Peck,
May 24th, 1925 *334 S. 42nd Street, Philadelphia, Pa.*



*Another Osler Anecdote**

THE mention of tuberculosis reminds me of another incident of importance, showing the state of the medical mind on the question of the Koch bacillus as a causative factor in this disease. He was holding a clinic—ward class instruction—and the subject was a young woman evidently far gone with the disease. Prof. Osler examined her and to our surprise he then examined the sputum. This was one of the first demonstrations of the bacillus tuberculosis in this country and Sir William was evidently not sure about the etiologic significance. He was cautious and said: "Gentlemen, I find the Koch bacillus and this is evidently a case of *bacillary phthisis.*" He then dwelt at considerable length on the non-bacillary type of phthisis. This occurred in the fall of 1884 and the small room given to him, a mere corner under the amphitheatre, was significant that senior group instruction was an innovation. The old University to be awakened by Sir William!

Thomas Hubbard,
316 Michigan Avenue, Toledo, Ohio.

*Received for second printing of this volume, November 22, 1926.

THE PATHOLOGICAL RECORDS OF THE BLOCKLEY HOSPITAL

H. R. M. LANDIS, M.D.

Philadelphia, Pa.

IN the issue of the Medical News for August 9th, 1884, the following item appeared:—

"Dr. William Osler, of McGill University, Montreal, is prominently and favorably mentioned in connection with the Professorship of Clinical Medicine in the University of Pennsylvania, rendered vacant by the transfer of Dr. Pepper to the Chair of Theory and Practice of Medicine. Dr. Osler is widely known as a talented scholar, a learned clinician and a popular teacher, and his election, which it is understood will be very acceptable to the Medical Faculty, would add undoubtedly to the high reputation which the University has already enjoyed."

A few weeks later the Canada Medical and Surgical Journal added that:—

"If Dr. Osler should finally accept this appointment, whilst recognizing its appropriateness, we could not but feel that his removal involves a serious loss both to McGill University and to this city."

These rumors became an actuality when on October 7th, 1884, he was unanimously elected to the Chair of Clinical Medicine of the University of Pennsylvania.

The affectionate regard and professional esteem in which he was held is attested to by his election as President of the Canadian Medical Association just before leaving for the States, the large testimonial dinner given in Montreal, and, finally, the marching of the students of McGill University in a body to the station to see him off. "Probably no public man has ever left Montreal whose departure has been more sincerely regretted by all with whom he was brought in contact."

A little less than five years later he again faced a change and finally on May 1st, 1889, the Philadelphia period of his development was brought to a close. In his address "Æquanimitas" which was his valedictory to the Graduating Class of the University, he said;—"Recking not my own rede, I illustrate the inconsistency which so readily besets us. One might have thought that in the premier school of America, in this Civitas Hippocratica, with associations so dear to a lover of his profession,

FIG. I.—OSLER AT THE BLOCKLEY MORTUARY—ABOUT 1886

Fig. II (a)—Entrance, "clinic gate", to Philadelphia General Hospital.

Fig. II (b)—Old Pathological Laboratory of the Philadelphia General Hospital. William Osler performed many autopsies in the lower left hand room (window to left of front door), and it was here that the picture was taken of him scanning the tissues (Fig. I, cp. window).

with colleagues so distinguished, and with students so considerate, one might have thought, I say, that the Hercules Pillars of a man's ambition had been reached. But it has not been so ordained, and to-day I sever my connection with this University. A stranger—I cannot say an alien—among you, I have been made to feel at home. More you could not have done."

What of this Philadelphia period? What did it mean to him and what part did it play in his development? These questions can, I think, be summed up in a few words. An avid interest in morbid anatomy in its relation to clinical medicine. A study of his professional activities as well as the personal recollections of colleagues and students indicate clearly that his career in Philadelphia was like unto that of an artist who follows his chosen path not for fame nor money but actuated solely by a love of his work and an ardent desire for knowledge. Next to his official teaching position at the University his chief interests were in the dead-house of the Philadelphia Hospital (the old Blockley Hospital) and the Philadelphia Pathological Society. That he had other interests it is true, but the record of his medical activities are largely centered about these. Blockley with its wealth of clinical and pathological material was for him literally a gold mine. This he acknowledges in a characteristic note (written in autograph on a prescription blank) to Dr. John Welsh Croskey.—

"Dear Croskey:

Greetings—cardiac. The American Who's Who has all the essential data, which your secretary can copy—I have added in the circular a few others. You may also like to add the following: —"I look back with rare pleasure to my term of service at Blockley 1885-89. My appointment I owe to Dr. Pepper. The wards were always full of interesting cases and of my literary output, which in Philadelphia, came very largely from the Philadelphia Hospital service, the malaria experience was of special value. I had the best and kindest of colleagues—Tyson, Bruen, Musser, Hughes and others. With peculiar pleasure too I look back on my association with a group of keen and intelligent residents, and with Miss Fisher and Miss Horner, in the recently established Training School for Nurses, nor must I forget dear old Owen, on the medical floor, with his Hippocratic gift of prognosis.

Yours,

William Osler"

As stated in the above letter he was appointed Visiting Physician to Blockley in 1885 and resigned in June 1889. Interested as he was in the clinical material in the wards, he was even more interested in the post-morten room. His devotion to pathology and his almost daily presence in the autopsy room led one of his colleagues to remark that "Osler was an excellent consultant, but the trouble was that he could so rarely be found when wanted." His keenness for performing autopsies finally got him into difficulties with the accredited pathologists of the Hospital. This led to the passing of a rule that no Visiting Chief could perform an autopsy except on a case from his own ward and then only in the presence of the Chief Resident Physician.

During his term of service at Blockley he performed personally 162 autopsies. Of this number he had been the attending physician in 94 while the remaining 68 belonged to his colleagues. That the opportunity to perform an autopsy should never be lost is evidenced by the fact that no less than 48 cases of pulmonary tuberculosis are included in the total of 162. No matter how familiar the pathological picture was likely to be, he apparently felt that there was always something to learn.

Probably his most important contribution to clinical medicine and clinical pathology from the Philadelphia Hospital was his study of malaria.

Laveran had communicated his findings in 1881 and 1882 to the Paris Academy of Medicine, and in 1884 published a large monograph on the malarial fevers. At this time, and indeed for several years more, "the attitude of the profession on the question of micro-organisms of malaria was one of judicious skepticism." It is now entirely forgotten that a bacillus malariae, described by Klebs and Tomassi-Crudelli, was, at the time of and following Laveran's discovery, looked upon by some as the cause of the disease. In this country those who first confirmed Laveran's discovery were Councilman, James and Osler. The latter, however, had originally been among the skeptics. After his own studies he manfully acknowledged that "When I first read Laveran's papers, nothing excited my incredulity more than his description of the ciliated bodies. It seemed so improbable, and so contrary to all past experience, that flagellate organisms should occur in the blood. The work of the past six months has taught me a lesson on the folly of a skepticism based on theoretical

conceptions, and of preconceived notions drawn from a limited experience." And in another place he says:—"In 1886, at the meeting of the Association of American Physicians, when Dr. Councilman presented a summary of Laveran's views, I (speaking out of the fulness of my ignorance) was extremely skeptical."

The results of his studies on the etiology of malaria were made the subject of an address given at the Conversational Meeting of the Philadelphia Pathological Society, October 28, 1886. This address was published in the British Medical Journal, March 12, 1887, under the title "The Haematozoa of Malaria." The paper is quite long and embodies the results of painstaking observations on 52 cases. In addition to the text description the article is freely illustrated with camera lucida drawings showing the cycle of development of the parasite. The thoroughness of this study, confirming as it did Laveran's work in every particular, did much to convince those who doubted that observer's claims. In a later paper on the subject (Johns Hopkins Bulletin No. 1, Dec. 1889) Osler states that Dr. Vandyke Carter, a distinguished pathologist in India, "had been rather repelled by the apparently extraordinary statements of Laveran, and had not given special study to the subject, until the appearance of my paper in the British Medical Journal."

To an ex-resident of the Philadelphia Hospital and recalling the irksome task (to be escaped if possible) of writing the notes of the pathologist, it was with some feelings of shame that I found that the descriptions of a very considerable number of his autopsies were in his own handwriting. These autopsy protocols are distinguished for their clearness of description and although rapidly recorded need little or no alteration.

A study of the minutes of the meetings of the Philadelphia Pathological Society indicate that from the time of his arrival in Philadelphia, and even before his election, he was an almost constant attendant of the meetings of the Society.

On December 11, 1884, it was noted that "Dr. Osler being present he was invited to take part in the discussions." He was elected a member of the Society on March 12, 1885, and made his first presentation April 9th.

At a meeting of the Society, November 10, 1885, he spoke in favor of the exhibition of card specimens after the manner of the London Pathological Society and moved that this matter

be referred to the Business Committee. This apparently was acted upon favorably as the showing of card specimens has continued to this day.

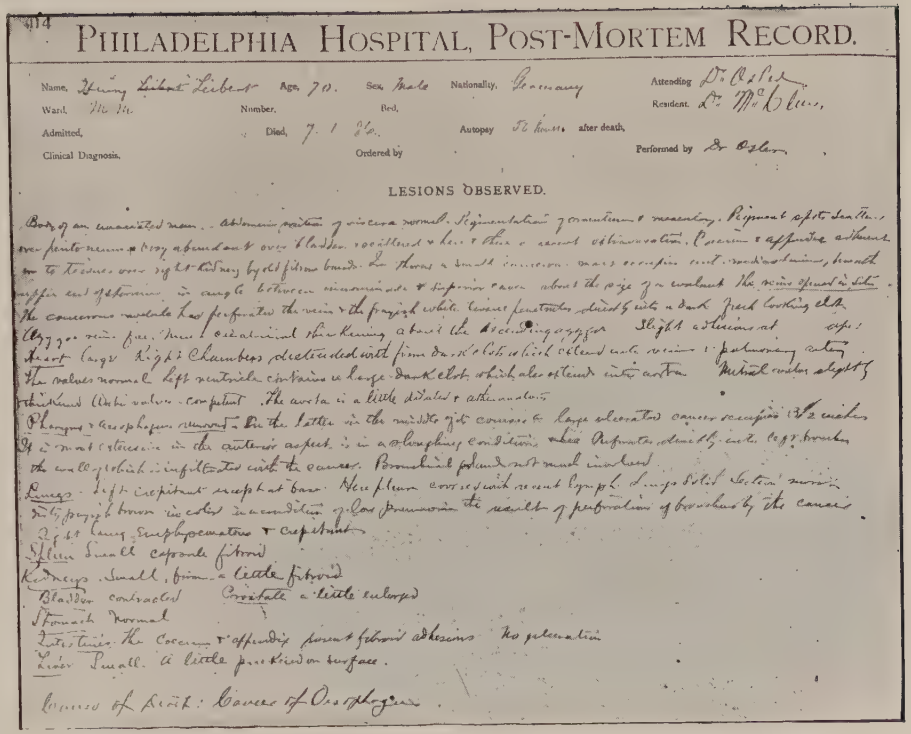
He was elected a member of the Committee on Morbid Growths, September 9th, 1886, and remained such until he left for Baltimore.

In the little more than four years that he was an active member of the Society, he appeared before it no less than fifty-two times. It was unusual if he did not have some interesting specimen to show or some new method of clinical microscopy to demonstrate. Nor was his interest limited to human pathology, for on several occasions he showed specimens obtained from the lower animals. While the majority of his presentations were in the nature of showing morbid specimens usually accompanied by a brief clinical history he, on a number of occasions, read more or less formal papers. Among these may be mentioned that on malaria, already referred to, "Notes on 100 autopsies of cases of pneumonia," "Aneurisms of the larger cerebral arteries; twelve cases," "Three Cases of Abscess of Liver," and "Intraperitoneal Sarcoma."

The Cartwright Lectures delivered in 1886, "On Certain Problems in the Physiology of the Blood Corpuscles" serve to recall the fact that he was one of the first in America to study the blood plaques. In his first article on "The Third Corpuscle of the Blood" published in 1883 (Medical News 12-29-1883), he stated that there is evidence to show that the third corpuscle plays an important rôle in coagulation. In the Cartwright Lectures, in referring to the various names suggested for this body he says: "I did think of suggesting the word *disklet* as very suitable for these *little disks*, but I had not the courage to add another to the already long list; moreover, as my own name has been used in connection with these bodies, I felt absolved from further sponsorial duties on their behalf."

The Gulstonian Lectures on Endocarditis were given during his stay in Philadelphia, but had no connection with his work there. He had been selected as the lecturer for 1885 prior to his election to the Chair of Clinical Medicine in the University of Pennsylvania, and the material on which he based his lectures was from the Montreal General Hospital.

During his stay in Philadelphia he published 39 papers



414

PHILADELPHIA HOSPITAL, POST-MORTEM RECORD.

Name, Henry ~~Liebert~~ Liebert Age, 70. Sex, Male Nationality, Germany Attending Dr. Osler

Ward, M M Number, Bed, Resident, Dr. McClure

Admitted, Died, 7. 1 86. Autopsy 56 hours after death,

Clinical Diagnosis, Ordered by Performed by Dr Osler

LESIONS OBSERVED.

Body of an emaciated man. Abdomen, position of viscera normal. Pigmentation of omentum & mesentery. Pigment spots scattered over pentoneum & very abundant over bladder. Recattered & here & there a recent extravasation. Coecum & appendix adherent to tissues over right kidney by old fibrous bands. In thorax a small cancerous mass occupies cent. mediastinum, breadth upper end of sternum in angle between innominate & superior cavae about the size of a walnut. The veins spread in situ. The cancerous nodule has perforated the vein & the frayish white tissue penetrates directly into a dark fresh looking clot. Azygos vein free. Much cicatricial thickening about the ascending azygos. Slight adhesions at apex. Heart large. Right chambers distended with firm dark clots which extend into veins & pulmonary artery. The valves normal. Left ventricle contains a large dark clot which also extends into aorta. Mitral valve slightly thickened. Aortic valve competent. The aorta is a little dilated & atheromatous.

Pharynx & oesophagus removed. On the latter in the middle of its course a large ulcerated cancer occupies 3½ inches. It is most extensive in the anterior aspect, is in a sloughing condition, & has perforated directly into left bronchus the wall of which is infiltrated with the cancer. Bronchial glands not much involved.

Lungs. Left crepitant except at base. Here pleura corrosed with recent lymph. Lungs solid. Section moist. Into pyrigh bronchus in color in a condition of low pneumonia the result of perforation of bronchus by the cancer. Right lung emphysematous & crepitant.

Spleen. Small capsule fibroid.

Kidneys. Small, firm, a little fibroid.

Bladder contracted. Prostate a little enlarged.

Stomach normal.

Intestines. The Coecum & appendix present fibroid adhesions. No ulceration.

Liver. Small. A little pucked on surface.

Cause of death: Cancer of Oesophagus.

FIG. IV.—A Page in Dr. Osler's Handwriting from Post Mortem Record, Philadelphia Hospital, dated January 7th, 1886.

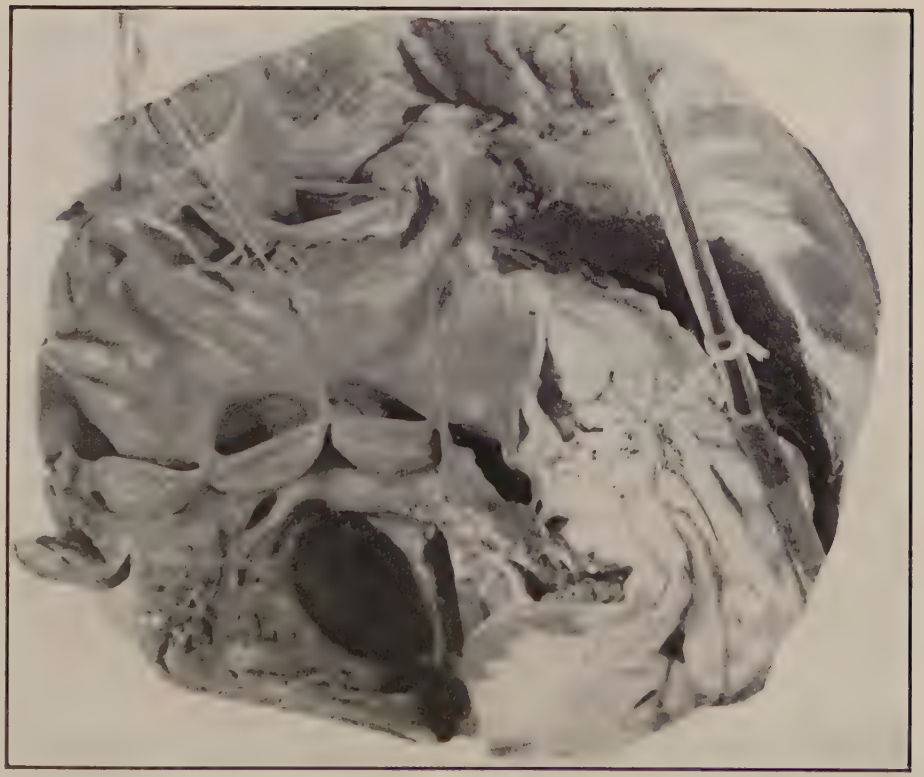


FIG. V.—PULMONIC VALVE WITH FOUR LEAFLETS.

Male, aged 73. Cause of death: General Tuberculosis. Autopsy by William Osler Book IV A, p. 383, Nov. 4, 1886.

From a specimen in the Pathological Museum of the Philadelphia General (Blockley) Hospital.

covering nearly every phase of clinical medicine and including, *mirabile dictu*, three papers on drugs!

The fact that he was selected as the successor of William Pepper as Professor of Clinical Medicine at the University is sufficient evidence of the reputation he had gained as a clinician. There can be no doubt, however, that the extraordinary opportunities which Philadelphia offered him for the study of morbid anatomy in its relation to clinical medicine enormously increased his knowledge and thoroughly solidified the foundation of his reputation.

Granting that times have changed and clinical medicine has broadened, one cannot escape the feeling that to-day we are paying too little attention to morbid anatomy in its relation to clinical medicine. Certain it is the assiduous study of morbid changes in relation to the phenomena they produced in life was the outstanding feature in the development of three of our greatest clinicians—Austin Flint, Edward G. Janeway and William Osler.

OSLER'S CONNECTION WITH THE LIBRARY OF THE COLLEGE OF PHYSICIANS OF PHILADELPHIA

E. B. KRUMBHAAR, M.D., Ph.D.

(From the Laboratories of the Philadelphia General Hospital)

"To add a library to a house is to give that house a soul." (*Cicero*).

SIR WILLIAM OSLER'S fondness for letters was more than the mere pleasant avocation of a busy teacher; throughout his professional career it was an abiding interest that towards the end bid fair even to eclipse medicine, as his major pursuit in life. Like Cicero he believed that *Haec studia adolescentiam agunt, senectutem oblectant, secundas res ornant, adversis perfugium ac solatium praebent, delectant domi, non impediunt foris, pernoctant nobiscum, peregrinantur, rusticantur.**

Twenty-two years ago he said in his address at the Boston Medical Library, "Books have been my delight these thirty years

*"These studies (literary pursuits) employ youth, give pleasure to old age, make prosperity more prosperous; are a refuge and a solace in sorrow, amuse us when at home, do not hinder us in our duties abroad, make our nights less lonely and in our travels and sojournings are our constant companions."—(*Cicero.*)

and from them I have received incalculable benefits." How natural then with his constructive ability for making things happen, that in each of the four cities with which he was identified, medical libraries should take on greater activity and profit by his beneficent interest. The McGill library not only was stirred into new life by his presence in Montreal, but now houses his magnificent private collection of medical books, and at his own request his ashes lie deposited in their midst. When he went to Baltimore the Library of the Medical and Chirurgical Faculty became one of the chief objects of his affection, and owed so many of its greatest treasures to his interest that the new hall was named in his honour, Osler Hall. Shortly after the birth of his son he writes Mr. Fisher: "We are starting a (journal) Club to furnish extra journals and new books to the old Medico-Chirurgical Library.... The young Doctor thrives." Even in Oxford the leaven of his presence was soon manifest: *ex officio*, one of the eight Curators of the Bodleian Library, he soon came to know its treasures and was instrumental among other things in starting the Bodleian *Quarterly Record* and acquiring again their first folio Shakespeare.

In Philadelphia his association with the Library of the College of Physicians proved no exception to the rule. Elected a Fellow of the College within a few months of his arrival from Montreal, within a year (January 6, 1886) he was elected a member of the Library Committee, during the chairmanship of Dr. I. Minis Hays. He not only served ably on this Committee during the rest of his stay in Philadelphia, but habitually prowled about among its treasures, so I am told, instead of keeping office hours or seeing private patients. An "important engagement" often was kept with old favorites on the library shelves. So well did he get to know the library's contents, that he was able to write from Baltimore several years later as to just where to find some duplicate odd volumes of the *Transactions of the Philadelphia Pathological Society* that he wanted for the Library of the Medical and Chirurgical Faculty.

The interest thus begun in our Library continued throughout his life. In February, 1891, shortly after going to Baltimore, he wrote, "I miss the Library very much. For it alone it would be worth returning to Philadelphia." Several times a year some short (but rarely hurried!) note would come to Mr. Fisher, W. W. Keen, Weir Mitchell, the Honourary Librarian or the Library

Figure II.—LIBRARY OF THE COLLEGE OF PHYSICIANS
ONE OF OSLER'S FAVOURITE HAUNTS.

Committee, congratulating them on some worthy acquisition or achievement or suggesting the gift of some rarity that he had lately seen or picked up. Somewhat overshadowed by the greater need of the Baltimore Library, this interest became more manifest after Sir William's move to Oxford. Among the eighty-four notes from his pen in the College Archives, by far the commonest are such as the following: "Dear Fisher—Has the Library *Lélut 'L'Amulette de Pascal'*, 1840. I have a duplicate copy. It is an interesting history of an hallucination". "Have you *Medicina diastolica. Paracelsus.* Translated by Parkhurst 12 mo., 1653. I have spare copy." Or again: "Have you the 1485 '*Opus repertorii prognosticon*' with the *Hippocratis Libellus de Medicorum astrologia*—the beautiful type and initial letter etc. of Ratdolt No. 56 of Redgreaves list? If not I can send a copy as another one came bound with a recent acquisition.....Tell Dr. Henry to please send me that paper of his on the bookworm. I have a drawing of a bookworm at work that will make the Library Committee sit up. Hope you will have it as a Xmas present. You will have before long a typed copy of my list of Medical Incunabula to 1480..... It has been a deuce of a job, but I hope it is fairly complete. My love to the President and to the members of the Library Committee." On April 15, 1917: "Thanks for that nice report. What a number of 'good items' on your list of additions. I should like to give the 200th *incunable.* I will try to arrange it—if the cobwebs are not too (*sic*) thick in my pocket! I am creeping up—111, more than double the number in any medical library in Great Britain..... Have you a good collection of the novels in which doctors (or the profession) are well portrayed? And the poetical works of doctors? They form interesting sections of a library. I did give you Geo. B. Wood's *First and Last*? S. W. M. (Weir Mitchell) made me hand it over to him. There are only a few copies extant. Greetings to the Library Committee." All these were written during his strenuous existence of the Great War. Other examples quoted by Dr. Packard in his address at the Osler Memorial evening of the College of Physicians[1] confirm Osler's vivid interest in the place, but make one wonder how he found the time, even in his orderly existence, not only to acquire the great range of in-

[1]Trans. of the Coll. of Phys., 1920, 3S, XLII, 147.

formation that they betray, but also to put it so frequently at the service of his former associates.

The Accession Book of the Library reveals fifty-four titles of books presented by Sir William, the great majority of them after he had left Philadelphia. The subjects cover a wide range through *incunabula* and *editiones principes*, five items by his beloved Sir Thomas Browne, down to modern works, including several of his own and a full set of his reprints; and, as Dr. Packard has mentioned, in nearly every case accompanied by an explanatory note as to why the book in question is a desirable addition. How many more he was instrumental in having bought will never be known; but the method of acquisition of the magnificent first edition of Celsus is by no means unique. Finding that Quaritch held it for sale at £80, he wrote Weir Mitchell from Oxford suggesting its purchase: "I'll give $25.00. Can't you bleed the other Fellows for the rest?"—an operation that was soon successfully performed.

The scrapbook about the Siamese twins, which he presented in 1916, is an evidence of his persistent desire to have the College form a complete collection on this topic, and characteristic of his methods. The fact that the autopsy on the twins had been performed by a Fellow of the College and described in its *Transactions* doubtless suggested the fitness of such a collection, and several of his letters on this subject are still preserved. After the presentation of the scrapbook, suggestions for enlarging the collection continued to arrive. As late as December, 1918, he wrote about an item that had just come in, with the admonition, "Try to make your Siamese twin collection as complete as possible." The opportunity for carrying out this idea still awaits an enthusiastic follower.

In 1908, Osler helped Dr. Keen effect an important exchange for our Library with the Paris Faculty of Medicine, whereby forty or fifty theses were presented annually in return for our *Transactions*. This was continued until the prohibitive cost of printing of the past few years terminated the arrangement.

His ruling passion continued strong until the end.* Lady Osler has written that Sir William left a memorandum during his last illness that certain books be left to certain libraries, and that the

* See his letter about incunabula of Nov. 20, 1919, quoted by Dr. Packard.

Fig. I.—Former College of Physicians of Philadelphia, 13th and Locust Streets, as it was during Osler's sojourn in Philadelphia.

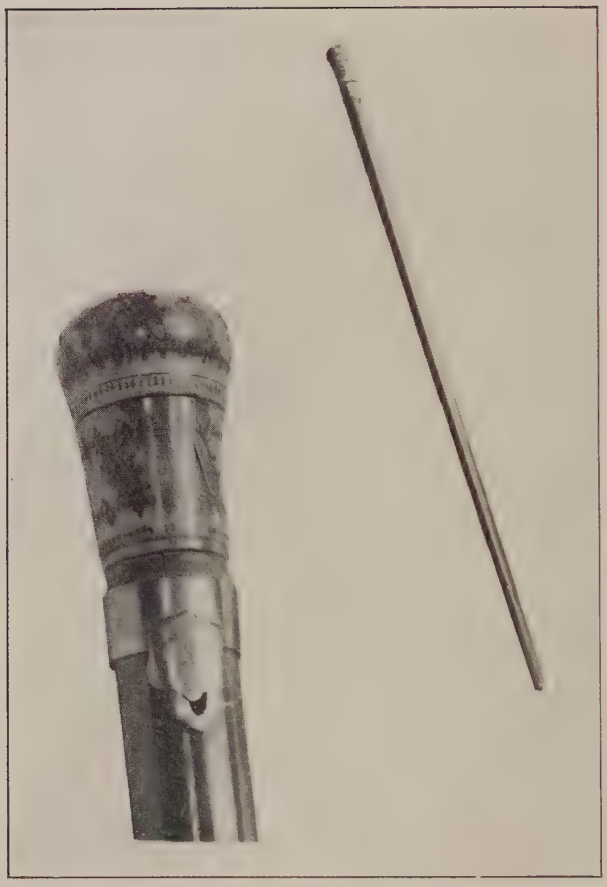


Fig. III.—Pomander Cane presented to the College of Physicians of Philadelphia by Sir William Osler. The canes were customarily carried by English physicians of the 18th century, and frequently snuffed as a protection against pestilence. As the name indicates, the head of the cane was "an apple of amber", the perforated ivory head unscrewing to admit a bit of amber. They are now quite rare.

list of these be included in the catalogue of his McGill Library. Thus we hope to cherish as his last gift, a valuable Montpellier manuscript, written in 1373.

Truly did he belong to the "third Class of men in the profession to whom books are dearer than to teachers or practitioners—a small, a silent band, but in reality the leaven of the whole lump. The profane call them bibliomaniacs, and in truth they are at times irresponsible and do not always know the difference between *meum* and *tuum*..... We need more men of their class, particularly in this country, where everyone carries in his pocket the tape-measure of utility..... Along two lines their work is valuable. By the historical method alone can many problems in medicine be approached profitably. For example, the student who dates his knowledge of tuberculosis from Koch may have a very correct, but he has a very incomplete appreciation of the subject..... But in a more excellent way these *laudatores temporis acti* render a royal service..... The men I speak of keep alive in us an interest in the great men of the past and not alone in their works, which they cherish, but in their lives, which they emulate".[2]

May more of us aspire to join this noble gathering, though it will necessarily be long before another can attain the exalted position of this master.

WORKS PRESENTED TO THE LIBRARY OF THE COLLEGE OF PHYSICIANS OF PHILADELPHIA

By

SIR WILLIAM OSLER

1. Aldrovandus, U. Serpentium..... 1640
2. " De reliquis animalibus..... 1606
3. " De quadrupedibus, 3 v..... 1639-1642
4. Allut, P. Etude biographique sur Symphorium Champier. Lyon, Scheuring..... 1859
5. Annual Calendar of McGill College..... 1896
6. Scriptores Astronomici veteres, Venetiis, Aldus, 1499 (very valuable)..... 1499
7. Bodleian quarterly record..... 1917
8. Bourne, H. R. Fox. Life of John Locke, 2 v. London, King... 1876
9. Browne, Sir T. Works. Edited by Charles Sayle..... 1904

[2] Books and men. Æquanimitas and other Addresses, p. 222.

10. " " " Pseudodoxia epidemica.*** London, Dod..... 1646
11. " " " Religio medici. Argentorati, Spoor..... 1665
12. " " " " " 10 ed., London, Curll..... 1736
13. " " " The Works.*** London, Baffet..... 1686
14. Celsus, Aurelius Cornelius. (De medicina libri octo). First edition, (one of several subscribers), very rare. Florentie, Nicolao (di Lorenzo)..... 1478
15. Charcot, (*et al.*). Traité de médecine, 6 v. Paris, Masson 1891-1894
16. Fothergill, A. Copy of (his) Will, Manuscript..... ....
17. Fox, G. H., (*et al.*). Illustrated Med. and Surg., New York.... 1884
18. Galen, C. Librorum (Opera omnia), 5 v. Venetiis, Aldus (Greek Text)..... 1525
19. Goodall, C. Royal College of Physicians of London. Kettilby. 1684
20. Green, T. H. Introduction to pathology and morbid anatomy, 3 Amer. ed. From 4th English. Philadelphia, Lea..... 1884
21. Harvey, A. On the Fœtus in Utero. London, Lewis..... 1886
22. Jenner, E. Further observations on the variolae vaccine. London, Low..... 1799
23. Jung, Ambrosius, (Tractatus perutilis de pestilentia....) Augsburg, Schonsperger, (with 9 others)..... 1494
24. Le bulletin médicale..... 1887
25. London's dreadful visitation. London, Cotes..... 1665
26. Martin, H. N. Physiological papers..... 1895
27. Osler, Sir W. Cancer of the stomach..... 1900
28. " " Cerebral palsies of children..... 1889
29. " " Collected reprints..... 1872-1907
30. " " Growth of truth as illustrated in the discovery of the circulation of the blood. London, Frowde 1908
31. " " La pratique de la médecine, 6 ed..... 1908
32. " " Principles and practice of medicine, 4 ed..... 1901
33. Phonographic records of clinical teaching..... 1904
34. Pires de Lima, J. A. A medicina em Portugal..... 1906
35. Priestley, J. Directions for impregnating water with fixed air. London, Johnson..... 1772
36. Proceedings of Amer. Assoc. for Advancement of Science..... 1880
37. " and Transactions of Royal Soc. of Canada. Montreal, Dawson..... 1882-1883
38. Redi, F. Osservazioni interno agli animali viventi. Firenze, Matini..... 1684
39. Report of British Assoc. for Advancement of Science. London, Murray..... 1884
40. Rogers, E. Modern Sphinx. A novel—London..... 1895
41. Röslin, Eucharius. Der Swangern Frau und Hebammen Rosengarten (rare). Argentor., Flach, (with 9 others)..... 1513
42. Sartorini, R. Macti Lister triumphator. Leipzig, Herbert..... 1887

43. Second ed. Official register of physicians and surgeons. ***State of California, San Francisco Board of Examiners 1885
44. Shaw, J. B. Essay on Diphtheria 1885
45. Siamese Twins Scrapbook (from the library of the late George Dunn) ....
46. Smith, Sir J. E. Selection of the correspondence of Linnaeus, 2 v. 1821
47. Thayer, W. S. Lectures on the malarial fevers. New York, Appleton 1897
48. Trecentale Bodleianum 1665
49. Tuke, S. Description of "The Retreat," York, for insane persons of the Society of Friends. York, Alexander 1813
50. Twentieth Century Practice, 19 v. New York, Wood 1895-1900
51. University College Hospital. Report of Surgical Registrar 1883
52. " " physiological laboratory 1874-1875
53. (Wood, G. B.). First and Last. A poem. London, Longman. 1860
54. Wotten, E. De differentiis animalium libri.*** Parisiorum, Vascosanus 1552

"DR. OSLER IN PHILADELPHIA, TEACHER AND CLINICIAN"*

J. C. WILSON, M.D.

Philadelphia

WE cannot think of Dr. Osler in Philadelphia without thinking of him before he came to us and since he left us. His whole previous career was a preparation for his work here; his half decade of work here was, it now seems, a necessary period of training for the great decade and a half at Johns Hopkins, and the rounded half century since he left off knickerbockers a complete and progressive course of development and preparation on this side of the Atlantic for the crowning period of an illustrious life upon the other. No part could have been left out.

Shakespeare's "Home keeping youth are ever dull of wit" has the fault of most sweeping generalizations. It is true, they mostly are. But not always. It depends upon the home. Populations have left New England, but who ever heard of anyone leaving Boston? Yet the Boston wit retains the old flavour. From most other places the bright spirits migrate. It is said that the test of the true American is the impulse to move on. If this be true, Dr. Osler is the very type of an American. Yet

* From an Address at the Farewell Dinner in New York, May 2nd, 1905

he was the embodiment of that imperturbability which he has so charmingly described as a medical accomplishment, but which we know to be essential to the mental make-up of a peripatetic philosopher.

I may be permitted to speak of Dr. Osler in Philadelphia from two points of view. First, the influence of our quiet Quaker life upon him, and second, his influence upon us.

First then, we at once sought to make a practitioner of him. But of that he would have none. Teacher, clinician, consultant, yes, gladly; but practitioner—no! and that with emphasis. This was partly due to his knowledge of affairs, partly to his temperament. One star differeth from another star in glory. His light was to be bright and guiding and seen of all men. Not for him the dim and shaded light of the sick room, the patient daily service to the weary sufferer, the tiresome round of daily calls, the vexatious failure of the approved method to accomplish the desired result. He recognized his metier and carried out his plan. And this gave him time and opportunity and of both he made supreme use.

To an institution traditions are what character is to a man. The traditions of the University of Pennsylvania deeply impressed him. Morgan, Shippen, Kuhn, Rush, Caspar Wistar were to him living personalities. His actual associates were such men as Agnew, Stillé, Leidy, Pepper and others whom we all know. The lives and characters of these men were not without influence upon the young Canadian, trained in the best way by association with men like Bovell, Howard and Ross, and familiar with the best methods and results of British and Continental Medicine.

Not less important was his connection with the College of Physicians, with its cherished traditions and magnificent library. Nor is the part played by the Pathological Society to be overlooked. Here he brought his best work, the result of long and keen study, illustrated by the findings in the post mortem room at Blockley, and always met in large measure the sympathy and admiration of the younger men.

So from point to point during the five years he was with us, at the best period of his life, he found the stimulus of tradition, of opportunity and appreciation.

What did he do for us? He made himself agreeable to the older men and demonstrated to the younger men how medicine

should be learned and taught. He broadened our conceptions in regard to the inductive method in medicine. Facts, facts, always the facts. The facts of the ward, of the microscope, of the laboratory, of the postmortem room. He made it clear to some of the younger men who are now reaping the reward of their work that it is not necessary for every man to be a practitioner in the ordinary sense but that long years of hospital and laboratory work constitute a better equipment for the teacher and consultant. He inspired his students with enthusiasm for letters and taught them the rare rewards that come of searching the medical scriptures. He showed that in the democracy of our profession any man is free, by a principle of self-selection, to attain the most coveted post of distinction and honour. He pointed out not only to us but to all men how fine and noble the profession of medicine is for those in it who are fine and noble.

He ornamented his discourse with quaint allusions to Holy Writ and The Pilgrim's Progress, but did not in those days say much about Montaigne and the Religio Medici and rarely alluded to Plato or Marcus Aurelius. Nevertheless he helped some of us to do a little thinking.

At length after the fashion of the nautilus he builded a more stately mansion and left us. We would have fain kept him. But that could not be. Without him the Department of Clinical Medicine at Johns Hopkins, mother of many teachers, might have been childless.

The Old World has given to the New many and great physicians. But these gifts have been returned not so much in number as in kind. The father of Brown-Séquard was a Philadelphian. Marion Sims passed many years and did much of his best work in London and Paris, and now to the list is added another imperishable name.

I asked a bit ago who ever heard of anyone leaving Boston. There is one famous case—a Boston boy who became the greatest American. There are points of resemblance between th t great philosopher and this great physician. In both are manifest vigour of body and intellect, untiring energy, unflagging interest in things and men, manysided knowledge with the wisdom to use it, that quality known as personal magnetism and the gift of leadership. Philadelphia is fortunate to have been the home of Franklin and the abiding place of Osler.

There are many other things that I could say of Dr. Osler. When we are deeply moved we do not say the things that are next our hearts. We take refuge in commonplaces, in persiflage. It is an Anglo-Saxon, an American trait. I speak not as a Philadelphian but as an American when I say that it is a good thing for us that he came among us. Not only by precept but also by example has he been an uplifting influence in our professional life. The source of that influence is to be sought not merely in his accomplishments as a physician, not in his learning, not in his wisdom, not even in his well-balanced and buoyant temperament, but in that basic principle which all recognize but none can define, which for want of a descriptive name we call character. It is character that tells and to character all things are added.

He had a trait that so many of us lack—greatness in little things—method, system, punctuality, order, the economical use of time. These have been the handmaids to his greater gifts. These have enabled him to widen his usefulness to lands beyond the seas.

Seest thou a man diligent in his business? He shall stand before kings.

A TRIBUTE TO SIR WILLIAM OSLER*

W. W. Keen

Philadelphia

I HAD the honour and the satisfaction of knowing Sir William Osler for just half his life. I first met him at a dinner given to him by the late Dr. William Pepper to introduce him to some of the profession when he came to Philadelphia. Even then at thirty-five his later characteristics were markedly developed.

He radiated cheerfulness always and wherever he went. I never met him (to use a disagreeable word), when he was "grumpy". Always bright, active, alert, cheerful, he walked about in an atmosphere of warmth and affection.

*Reprinted by permission from the Sir William Osler Memorial Number of the Canadian Medical Association Journal, July, 1920, pp. 30-41.

After he went to Oxford I saw him rather infrequently, but many letters and little notes, mostly handwritten, reached me, and always about some useful scientific or literary matter, sometimes asking, more often giving or offering help.

His published contributions to medicine were marvellously many, but all were fresh in thought and style and influenced the profession almost more than his classical "Principles and Practice of Medicine." This work supplanted, because it excelled, even "Watson's Practice" which so long had held the stage.

But quite equal if not more influential—to use Sir Clifford Albutt's happy words—he had that wonderful power only possessed by a few great teachers of "inseminating other minds". Wherever he went the wheels began to go 'round, things began to be done, and all for the good of the profession and of the community. The dry bones as in Ezekiel's Vision gathered themselves together and became inbued with active life. The diligent were encouraged to become more diligent, the slothful were shamed into activity. He was a fount of inspiration. His personal influence extended more widely and to better purpose than that of almost any one I have ever known. Weir Mitchell and William Pepper were of the same type and when this powerful triumvirate were gathered in Philadelphia they had no rival the country or possibly the world over.

No institution in Philadelphia was more cherished by him than the College of Physicians and its splendid library. He was always giving notable books to it. Even after he went to Oxford his benefactions did not cease. Once he wrote to Mitchell that Quaritch had a splendid copy of the first printed edition of Celsus (1478), beautifully bound, as became its author, which could be had for £80. He wanted the College to have it and wrote, "I'll give $25. Can't you bleed the other Fellows for the rest?" Mitchell promptly phlebotomized the other Fellows and the book now ornaments our shelves.

When I spent some months in Italy in 1907-1908 I begged and otherwise gathered considerably over $1,000, with which I bought for the College library twenty-five incunabula and other rare books. He visited Italy soon afterward and wrote me on a postal card a note beginning in large and very legible letters, "You Pig," and proceeded to chide me with buying a number of works he wanted, but added that in spite of my raid he had man-

aged to find a few *rariora*. He then added characteristically, 'If you come across Servetus' 'De Christianismi' don't buy it. It's not for the likes of you to read!" Inasmuch as only two copies have survived the wrath and the torch of John Calvin the caution was an instance of his inextinguishable humor.

His disciples were more numerous than his pupils. Wherever the English tongue was read his great "Principles and Practice of Medicine" was to be found. His exposition of the present was rooted in his knowledge of the past. "It may be doubted," wrote Chaplin, the Harveian Librarian of the Royal College of Physicians, London: "It may be doubted if the annals of medical history contain another example of a physician uniting so completely in his intellect a whole hearted veneration for the past in medicine and the keenest enthusiasm for modern medical methods and knowledge."

His mind was permeated with the great Grecians and great Romans and he constantly borrowed shafts from their quivers. So intimate and conspicuous was this fundamental knowledge that he—a scientific specialist—received the extraordinary honour of election to the Presidency of the Association of Classical Teachers of Great Britain in 1919. His "The Old Humanities and the New Science"* is one of the most remarkable of his addresses. He accused the Humanists of lamentable ignorance of the modern progress of science and equally attacked his fellow scientists for so utterly neglecting the Humanities—yet made and kept friends on both sides.

In a long life I have never seen so many and such whole hearted tributes to any other scientist. All classes of men and all countries have united to do him honor. Those who knew him best feel the loss most deeply.

*Brit. Med. Jl., July 5th, 1919.

BOOKS AND THE MAN*

WILLIAM OSLER

Poem by the late Professor S. Weir Mitchell, of Philadelphia, before the Charaka Club, New York, March 4th, 1905.

WHEN the years gather round us like stern foes,
That give no quarter, and the ranks of love
Break here and there; untouched there still abide
Friends whom no adverse fate can wound or move:

A deathless heritage, for these are they
Who neither fail nor falter; we, alas!
Can hope no more of friendship than to fill
The mortal hour of earth and mortal pass.

Steadfast and generous they greet us still
Through every fortune with unchanging looks,
Unasked no counsel give, are silent folk,
The careless-minded lightly call them books.

Of the proud peerage of the mind are they,
Fair, courteous gentlemen who wait our will,
When come the lonely hours the scholar loves,
And glows the heart and all the house is still.

Wilt choose for guest the good old doctor knight
Quaint, learned, and odd, or very wisely shrewd,
Or with Dan Chaucer win a quiet hour
Far from our noisy country's alien mood?

How happy he who native to their tongue
A mystic language reads between the lines:
Gay, gallant fancies, songs unheard before,
Ripe with the wordless wisdom love divines.

*Extracted, by permission, from the Proceedings of the Charaka Club of New York, 1906, II. 1-4.

Rich with dumb records of long centuries past,
The viewless dreams of poet, scholar, sage;
What marginalia of unwritten thought
With glowing rubrics deck the splendid page.

Show me his friends and I the man shall know;
This wiser turn a larger wisdom lends:
Show me the books he loves and I shall know
The man far better than through mortal friends.

Do you perchance recall when first we met—
And gaily winged with thought the flying night
And won with ease the friendship of the mind—
I like to call it friendship at first sight.

And then you found with us a second home
And, in the practice of life's happiest art
You little guessed how readily you won
The added friendship of the open heart.

And now a score of years has fled away
In noble service of life's highest ends,
And my glad capture of a London night
Disputes with me a continent of friends.

But you and I may claim an older date
The fruitful amity of forty years—
A score for me, a score for you, and so
How simple that arithmetic appears.

. . . . . .

But if the oldest friends are best indeed
I'd have the proverb otherwise expressed
Friends are not best because they're merely old
But only old because they proved the best.

DR. OSLER DURING HIS BALTIMORE PERIOD.

FOREWORD

DR. OSLER AS THE YOUNG PHYSICIAN'S FRIEND AND EXEMPLAR

LEWELLYS F. BARKER, M.D.
Baltimore, Md.

WHEN one's debt to any person is as great as is my own to Dr. Osler, any form of acknowledgement of it must seem to the debtor wholly inadequate. Moreover, it is of certain portions only of one's debt to a beloved person of which he dare speak; there are other portions that belong to those more intimate things of life of which one would fain be reticent. Though much has been and is being revealed of the character and personality of Sir William Osler, those who knew and loved him best feel sure that there is a half that will never be told.

I remember very well my first contact with him. It was in 1891, toward the end of my year's interneship in the Toronto General Hospital. A stray copy of the first number of the *Bulletin of the Johns Hopkins Hospital* had found its way to the residents' lounge and I was so impressed with the possible opportunities of work at the new hospital that I turned to a fellow-interne (Dr. Thomas Cullen) and said to him, "I wish I could go to Johns Hopkins." All young Canadians in medicine had heard with pride of Dr. Osler's successful career and of his appointment in Baltimore, and, in a moment of courage that now looked back upon seems to have been close to audacity, I sat down and wrote

directly to Dr. Osler, asking him whether there was any way in which a young graduate who had no money could find opportunity to work at the Johns Hopkins Hospital. In a few days came a reply, stating that he would be in Toronto soon and would see me. I shall never forget the trepidation with which a week or two later, at his summons, I called upon him at the house of a relative, nor the great relief I felt on meeting him, for he quickly discerned my anxiety and timidity, and by that magic that many have known and marvelled at, put me at ease and led me to talk in a way that surprised me, of what I should like to do. He then told me that it was his desire that at the Johns Hopkins Hospital there should be opportunities provided for young men who, like myself, desired to continue their studies after graduation and before entrance upon practice. Though he had no vacancy on his resident staff at the time, he thought there might be one later. In the meantime, he had been authorized by Dr. Walter B. Platt to select an interne for a three months' service (living and $30.00 per month) at the Garrett Hospital for Sick Children at Mt. Airy, Md. Would I care to take this position? If so, he would recommend my appointment. I was delighted of course, and accepted on the spot. Was not Mt. Airy near Baltimore? And, possibly, at the end of the summer, I could at least see Johns Hopkins Hospital and the men at work there.

In the autumn, having saved $60.00 of the $90.00 honorarium, I found that I had ample funds to defray expenses in Baltimore for a month and still pay my way back to Canada. Dr. Osler invited me to go through the wards with him, or with Lafleur, daily, and there I saw and heard much of typhoid fever, malaria, and amoebic dysentery that was novel to me. He also introduced me to Dr. Welch, who assigned me a place in his laboratory and taught me to grow and study several strains of streptococci in which he was then interested. Dr. Councilman was diligently working in the pathological laboratory; Dr. Flexner,

who had just been appointed Fellow in Pathology, was experimenting with diphtheria toxines, and Dr. Thayer, back from Europe, showed us Ehrlich's technique for staining blood-smears. That was a month of intense enjoyment to me, saddened only by the fact that it was but four weeks long. For there seemed to be no prospect of any position on the interne staff of the hospital; all the vacancies for the coming year had been filled.

The last day of September came and with it a recognition that my purse contained but little more than the price of a ticket to Toronto. But on that very day, Dr. Osler summoned me again to say that one of his assistant residents had been compelled to relinquish his post and that I could have the place if I desired it. Though there was no salary, it included board and lodging in the hospital, and as he had need of "help" in the way of gathering materials for the revision of an article on the anaemias, this would enable me, if I desired to undertake the work, to make a little money through the winter. I was thus suddenly and unexpectedly elevated to the seventh heaven of delight—all through the thoughtfulness and kindness of one upon whom I had not the slightest claim; and I entered upon what turned out to be a period of nine years of residence in the Johns Hopkins Hospital. And in the Hospital I had, as did so many others, the great privilege of observing Dr. Osler at work, of enjoying personally his friendship, and of striving to profit by his example.

I record this personal experience as a single instance, but a typical one, of the kind of thing that many who entered medicine during the past thirty or forty years would gladly report, if called upon, of their early relationship with that great friend of young men. Doctor Osler seemed to regard it as a special privilege to make use of his high position and of his wide influence to advance the interests of eager and ambitious youth. His thought, his sympathy, his time, and very often, too, his money were freely given in helping young fellows get a start.

Nor was it only at the start that he desired to be helpful. Ever after, throughout his whole life, he kept the men in mind to whom in any way he could be of use. His memory of persons and conditions must have been prodigious, but even the strength and breadth of his memory were exceeded by the dimensions of his sympathy and good will. His character and personality were, moreover, such that,throughout the country, great numbers of medical men whom he never actually knew were influenced by his "way of life" to their enduring good. As I look back upon the past thirty years, a galaxy of specimens of kind acts, of encouraging words, of friendly attitudes, of wise precepts, of subtly intimated admonitions, and of stimulating enthusiasms crowd into recollection. Would that the young men of every period in medicine could enjoy the comfort of such a friend and could reap the inestimable advantages of such an exemplar!

The precedents that he set will long serve as models of practice, of teaching and of investigation for men who choose internal medicine as a vocation. His placing the welfare of the patient first, his accuracy of method and thoroughness of examination, his meticulous records of his observations, his insistence upon the correlation of clinical facts with their anatomical substrata, his interest in etiology and in a clear vision of the successive links in the chain of pathogenesis, his vigorous and graphic methods of presenting facts and principles to students, his skill in inspiring his clinical clerks and his assistants with enthusiasm for work, his interest in the history and bibliography of his subject, his intuitive grasp of solvable clinical problems, and his untiring support of those capable of advancing medicine by original research—all were patterns of excellence, standards of clinical aim and performance that internists of our own and subsequent generations will find it worth while zealously to imitate.

But fully as important as his exemplification of the desirable in the special work of the internist was the signifi-

cance of the manner of life of William Osler as a paradigm for high and noble living; for in this he set an example not only to the members of our profession but to all men. To feel deeply and many-sidedly, to think actively, and to strive strenuously is to live fully and wisely; and to few men has it been given to live more fully or more wisely through a life of seventy years than to him whose life we, in this volume, commemorate.

In his early life, partly owing to a somewhat fragile constitution, partly due to family and medical training, he recognized the importance of the preservation of health for happiness and for successful work. And by early manhood he had established habits that contribute to the smooth-running and full-efficiency of the physical machine. I remember, from the beginning of my acquaintance with him, how impressed I was with his moderation in the gratification of the physical appetites, and with the regularity of his habits of work and of sleep, indeed, with the general *orderliness* of his life. One never saw any overindulgence in food or drink; indeed, in these matters he leaned toward asceticism. It was a rule with him to cut out unsparingly any article of diet that had the "bad taste to disagree" with him. He warned his patients against "stoking the engines too much" and urged them to be sure to keep clean of "ashes and clinkers." There was nothing of the faddist or fanatic about him, however, in these matters of food and drink. He believed in the enjoyments that leave no hurt, and even when himself abstemious put no damper upon the joy of others. I recall how, once entering a room in which a group of men were indulging in a "night cap," he was invited to join them and did so with gusto, insisting that he always took his whiskey "neat," and swallowed—a half a thimble-full! His jocular allusions to "too much companionship with Lady Nicotine," and to "fooling with Bacchus, or worst of all, with the younger Aphrodite," though they were not wholly deterrent, certainly did much to encourage restraint among the

young men of the hospital and medical school. He retired early and rose at a regular hour. Bed at ten or soon after, and breakfast before eight were rules that he followed whenever practicable, and the long summer vacations at Murray Bay gave relaxation and refreshment so much needed after an arduous academic year.

The material rewards of practice were never, with him, a first consideration. Though he knew the importance of an income suited to his needs and of a competence for later life, he always sought first the welfare of his patients and of his pupils, believing that all necessary things "would be added to him." The creative impulses distinctly overshadowed the possessive impulses in his make-up, and though he would have been the last person to censure the financial policy of a fellow-practitioner, he undoubtedly had a laudable contempt for any unjust exploitation of man's necessities.

As a worker, Dr. Osler was a marvel to us all. I remember well the year in which he wrote his text-book; day by day, steadily and untiringly, he put all available time and energy into the production of that notable volume. In professional work, no one could have been more solicitous for the best use of the hours or of his forces that he was. The advance of medicine and the welfare of the profession seemed to be for him objects of ideal desire; on them he expended his energies unstintingly; he was their votary. But he worked one day at a time; "sufficient unto the day was the goodness thereof"; Goethe's, "Do the thing just ahead," and Carlyle's "Do what lies clearly at hand," he often told us, were maxims that merited observance. Not that his labourious days, however, meant the scorning of delights; for work was a kind of play to him and one would think that he translated Horace's *carpe diem* as the enjoyment of the passing hour in professional activity.

He had a thirst for knowledge that was insatiable and he enjoyed so much his excursions into the known and into the borderland between the unknown and the known

that he easily led others to accompany him. He wanted us to share the fun that so deliciously thrilled him. His emotional vivacity, due to the Celtic strain in his heredity, was pronounced; but, as in Faraday, it was combined with a love of order, tenacity and a high degree of self-discipline.

His love for the records left by the "giants in the earth" who had preceded him was constantly in evidence. We were ever being sent to the library to look up the exact words of some master in medicine; no wonder that librarians and medical historians adored him.

And in general literature he had a fine and discriminating taste. How many of us there are who owe to him our introduction to one or another of the great authors of the past—to Plato, to Plutarch, to Burton, to Sir Thomas Browne, or to one or more of his favourite philosophers or poets! And in our own little libraries, what books are more cherished than those that came as gifts from him? I prize my folio Vesalius the more because of the way it came to me.

Distinguished as he was in the art and science of medcine and in his love of the best in literature, he was no less so in his knowledge and practice of the art of sociability. Who could have been more hospitable? And whose hospitality could have been more enjoyable? In Baltimore his house was a Mecca, and, in Oxford, Norham Gardens was the place that the medical American aspired to visit. Through native capacity and wide professional and social experience Dr. Osler had acquired an unusual knowledge of human nature; his intuitions of the character and personality of those with whom he came in contact were almost uncanny. One was reminded of the fine saying of Leonardo de Vinci: "True and great love springs out of great knowledge, and where you know little you can love but little or not at all." He won friendship and affection because he loved his fellow man and because of his recognition of the best qualities in, and of the good intentions of the men and women about him. He never permitted him-

self to judge a human being adversely, and he had an unusual power of putting himself by imagination fully in his fellow's place. Malicious gossip was anathema to him. As I write, I recall one of his whimsical paradoxes: "Never believe anything derogatory to a fellow-practitioner, even when you know it's true." It was this love for, and this understanding of, people, that doubtless accounted for much of his success in psychotherapy; for though he made no pretence to special knowledge of psychoanalytic methods or of psychiatry, there was, perhaps, no practitioner of his time who was more expert in giving serenity to the broken spirit. He worked always, also, for the unity and concord of the members of our profession, attending and contributing to the programmes of more medical meetings, I believe, than any other man of his time. How many new associations he was specifically instrumental in organizing we may learn from the perusal of Dr. Cushing's Biography.

Dr. Osler's life cannot fail to exert a powerful influence for right living upon coming generations of young medical men as it did upon those who were privileged personally to know him. For he was a friend of the young men of the future as well as of those of his own time. His published addresses, together with the multiple testimonies that are appearing from his contemporaries with regard to his conduct and ideals, ensure the persistence of his influence. He is among the small vanguard of individuals who have known how to live a full and harmonious life and to impress others with their way of living. The true, the good, and beautiful in life can be achieved only through determined struggle and persistent toil. But in the process of striving and toiling what can be more inspiriting than to have before us for joyous contemplation the beauty of the ideals and of the achievements of a friend who was also a great exemplar?

DR. WELCH DR. HALSTED DR. OSLER DR. KELLY

"THE FOUR DOCTORS"

Painted by Sargent

OSLER AS I KNEW HIM IN PHILADELPHIA AND IN THE HOPKINS

Howard A. Kelly

Baltimore, Md.

I WONDERED, when mementoes of Osler were flowing in for the *Hopkins Bulletin* in 1919, whether I might not at least claim the distinction of being the first of all his Baltimore friends to know him well, as our friendship began in the eighties while he was teaching in the University of Pennsylvania in Philadelphia, and while I was practising in Kensington, offering my services as a sort of a medical *generalissimo*, referring in the latter term not to any personal qualifications, but rather to the exceedingly broad boundaries of my practice, including both medicine and surgery, with Osler backing me in the former and D. Hayes Agnew in the latter.

I was living in Philadelphia in Kensington, the north-eastern mill district, culling surgery out of a large practice, fostered by my previous residence in the Episcopal Hospital there; at the same time I was trying to keep in touch with the University of Pennsylvania, my *alma mater* in Arts as well as Medicine, when it became manifest that some fresh and stirring blood had entered the college life.

The University, with so many eminent men camping on her very doorstep in Philadelphia, and with that tendency to nepotism, a form of paternal pride too often seen in our large institutions, had, as we younger men thought, driven out John Guitéras of brilliant promise, to protect William Pepper, and now, without hesitation, we understood, she had actually broken the shackles of tradition, and set William Osler from McGill in Montreal, in a promising position.

Fresh invigorating currents of life and new activities in our medical teachings were felt at once, and the outcome was that every sturdy expectant youngster in short order lined himself up as a satellite to the new star. Osler breezes and currents swept everywhere through the conservative halls of the old medical centre, and yet it was not altogether without difficulty that he

securely established himself. Weir Mitchell, with reason in his later days to cultivate kindlier feelings towards the University than in his young manhood, was, from the first, although much older, Osler's devoted and intimate friend, and one by one the university faculty was won to appreciate him, perhaps including even Pepper too, though I am not so sure. My own life first touched Osler's in the above mentioned north-eastern mill district, a long way off. Aside from anatomy and chemistry, I picked up my best medical education while a resident in the Episcopal hospital and later in the homes of the Kensington weavers. While a student on the benches, Wood's physiological therapeutics and Stillé's didactic lectures on medicine seemed deadly to me, and worst of all was Tyson's lifeless pathology, elucidatedby Formad's quizzes. So it remained to get the real education at the bedside, and there Osler constantly and generously came to my aid, though I lived *in ultima Thule*, for it was more than a Sabbath day's journey in those days to visit Kensington from down town and Walnut Street; it took an hour in the street car, and was a long drive over the bad, unspeakably bad, Philadelphia streets, but Osler came and Agnew came, carrying their medical and surgical lamps to illuminate some of the problems of the vast domain in which all medical graduates are presumed, immediately after the reception of their degree, to be experts.

The first patient Osler came to see had anorexia nervosa, a condition I had never even heard of. He stayed to dine at Norris Square, and my then large and growing collection of medical classics must somehow have impressed him. I rejoice now to recall that my *editio princeps* of Galen later passed into his hands, together with Vesalius' *epistola*.

Though not summoned to see my bay horse, old Dick, he noticed as we ambled over the cobblestones, that he groaned and faltered as though in great pain, and at once diagnosed a verminous aneurysm, the pathology of which he had worked out at McGill.

Then suddenly he disappeared into the limbo of the unknown and was found in Baltimore! And there, after a year's time, I followed at his behest, to enter a more concentrated field of work, freed from the necessity of raising funds to build a gynaecological hospital on the university grounds. To the Baltimore record I can add nothing, for it is known and read of all men; what a blessing that noble quartet, he and Welch, and Halsted and

Hurd, have proved to be in this community. I leave others to appraise Osler's skill as a medical man, and his love of classics. I always think of him first of all as one who brought order out of chaos in the medical profession of this city, a task effected by his own kindly personality, his insight into human nature, and the genuine affection he ever felt for all men who could in any way be won over to lay aside bitterness and strife for the higher good of suffering humanity. It was his settled policy never to speak ill of anyone, but always to discover the good, and so he converted the hostile camps into a kindly family of cooperating doctors. To his credit be it said that several times in flagrant cases he broke his rule and administered castigation. Once I recall when it appeared in consultation that Dr. William Howard was plying Rebecca, to whom he was engaged, with too much morphia, he spoke out in no measured terms.

Medicine in Baltimore had a carnassial denture in the old days, and Osler and Welch drew the offending weapons, and so made possible all the recent medical progress.

I want to lay claim to a gift of prophetic insight (a *rôle* I doubt not in which many of my colleagues have anticipated me); I had declared from the earliest days that Osler was bound for London, and I often longed to go with him when he went. The outcome, the pinnacle to which he ascended, exceeded, I think, all our fond anticipations. Who, too, but he, would have maintained unabated the same interest in all his old friends, and who else would have turned the ocean into a highway, and his new position, detached as it was from any vast clinical facilities, into a veritable medical Mecca for our American medical world. What a heritage he has left us wherever he has lived and what blessed new bonds he has created between the three great countries of his residence; let us who survive cherish and strengthen them!

"Others have labored, ye have entered into their labors."

THE PERSONALITY OF WILLIAM OSLER IN BALTIMORE

Henry M. Hurd, M.D.

Baltimore, Md.

THE personality of Doctor Osler was unquestionably an important factor in his useful life. His bright face, quick intuition and above all, his kind and courteous manner, inspired confidence and affection. I remember distinctly when I first saw him at a meeting of the Canadian Medical Association held at Kingston, in the summer of 1884, while he was still a resident of Montreal. He was Secretary of the Association during the session, and his winning personality, tact and good judgment, together with his ability to manage physicians who were at times tedious, opinionated and wrong-headed, was there displayed in a remarkable manner. He was spare in flesh, with a dark olive complexion and a slender figure. As Secretary of the Association, he encountered many difficulties in the way of personal feeling and local prejudice on the part of the physicians. Difficulties were smoothed over and asperities were softened by his courtesy, good humour, and above all, by his ever present and sparkling wit. At one time, however, it became necessary for him to administer a speedy rebuke to a wrong-headed, obstinate and somewhat unmanageable person, which was done so effectively as to prevent any further difficulties from that source during the remainder of the meeting. From my subsequent acquaintance with Dr. Osler, I often wondered how he was then able to keep in such close touch with the routine affairs of the meeting. Later in life, perhaps, he did not always regard the idiosyncrasies of individual persons closely, but I cannot help paying a tribute to his grasp of difficult situations, his courtesy, kindness and above all, his intense desire that the meeting of physicians should be most profitable to every member. He seemed to exercise magical power over other members of the Association, convincing their minds and moulding their wills to such a degree as to secure harmonious and efficient action on the part of all.

The same characteristics were observed when I met him again in Baltimore, in 1889, at the time he removed from Philadelphia to become Physician-in-Chief in connection with the Johns Hopkins Hospital. He made his home at that time at the Hospital and for a period of nearly two years, during which he organized his medical clinic and wrote a book, "The Principles and Practice of Medicine." He occupied rooms in the Hospital and was a buoyant factor in the development of student life and the promotion of medical study. I have never known any man who had such an ability to do steady, regular and grinding work day after day and week after week as he displayed during the period he was writing his text-book on medicine. He arose early in the morning and remained at his work at every leisure moment not required by medical duties. He filled his room with all sorts of medical literature and consulted every necessary work in the Library of the Hospital and of the Surgeon General's Office in Washington, and after a labour of seven months, he finished his gigantic task, which will always be a monument to his ability as a writer and to his knowledge as a physician. He seemed to be able to penetrate the inner core of every subject and to utilize it for the instruction of friends. The book also contained many interesting personal revelations of his own wit and perception of character, and the first edition, especially, contained allusions to personal friends and eminent physicians who in his judgment had inculcated certain erroneous ideas. His allusions were always good-natured but sometimes critical, and I am sure the effect, even upon those criticized, was not bad. In some instances, in fact, I think they were led in this manner to correct some erroneous views. His life and example were always strongly in favour of every form of social uplift. He was charitable, kind, and interested in all persons, but occasionally he was capable of a scathing denunciation of what he considered to be narrowness of mind and unnecessary restriction of the rights and privileges of others. His influence upon students in Baltimore, as everywhere else, was most remarkable and he was able intuitively to select those who were capable of doing good, efficient and original medical work, as well as those who required a certain degree of nursing and care on the part of the teacher. It was interesting to observe the men whom he trained and to witness their development in mental stature and ability to cope with medical subjects.

He early became very much impressed with the extent to which tuberculosis prevailed in the city of Baltimore, largely because of its crowded and unsanitary coloured population, and in season and out of season, he preached sanitary reforms which eventually resulted in great good to the city. For example, when he came to Baltimore, he found cobbled streets which could not be effectively and properly cleaned even when sporadic efforts were made to do so, because of the irregularity of their surface and the difficulty of looking after them. There was also at that time no good system of disposal of the sewage of the city, and the health of its residents was imperilled by accumulation of garbage and sewage in the streets and the consequent pollution of drinking water. In season and out of season in public meetings, he denounced in no unmeasured terms the hygienic sins of the city and urged that steps be taken to remove such conditions, and unquestionably was a powerful factor in producing a much better state of things. He early took measures to form an Anti-tuberculosis Society, and personally and by the contributions of his friends, succeeded in stirring up a very strong interest in the eradication of the disease. Largely through his personal influence, he induced Mr. Henry Phipps, of New York, to found a Tuberculosis Clinic in connection with the Johns Hopkins Hospital and to furnish funds for its proper development. This was done early in the history of the Hospital, and the work there initiated was unquestionably most effective in arresting the spread of tuberculosis in the city and state. In connection with this, there was also established through his influence an Association of Nurses to visit the tuberculous in their homes, and to instruct families as to proper hygienic living and greater efficiency in combatting disease.

The Health Reports of Baltimore at this time showed that typhoid fever was one of the greatest causes of mortality and a serious foe to public health. His public lectures upon this subject were of great value and pointed out in a remarkable way the menace to health which came from all unsanitary conditions.

His relations to medical students were most interesting. He invited them freely to his house and read the older medical classics with them. He was a friend to everyone and his house and his purse were open to those who needed help, and his aid was given in no stinted way. He also had great affection for his

THE JOHNS HOPKINS HOSPITAL IN 1905.

old friends and when they came to visit him, especially those who were Canadians, he was the soul of hospitality. With it all, there was a degree of boyishness in his manner which sometimes gave a false impression of his character. His boyishness, however, and love of fun continued as long as he remained in Baltimore, and many of his friends learned to know what to expect and to measure the amount of credence to be placed upon certain of his extravagant statements. He was a friend to all and was warmly and sincerely loved and revered by his associates, students, nurses, and all persons who in any way came in contact with him.

OSLER AND THE STUDENT*

THOMAS R. BROWN

Baltimore, Md.

IN a lay sermon delivered before the Yale students a few years ago in which Dr. Osler offered them "A way of life"—he began with two words which show more plainly than many pages could his real relation to the student,—for these two words were, "*fellow-students.*" In these words lay the real reason for his unique and lasting influence upon all who studied with him, for he, with his vast experience, his wonderful insight, his profound knowledge, his poetic vision, his deep sympathy, was still always at heart the student, always studying, always delving more deeply into the mysteries of health and of disease, giving always, yet always ready to receive, teaching, yet ever ready to learn.

To those privileged to be his students in the early days of the Johns Hopkins medical school—a truly golden age to each and every one of the small, though ever growing group,—he preached, as he lived, a glorious philosophy of life, a joy in work, doing the day's tasks, "living for the day and for the day's work," with a wonderful belief in his fellowmen, never losing faith because some had failed him, giving without stint his best to everyone, with no thought that some might prove unworthy of the trust. He felt with Goethe that "the classical is health, and the romantic di-

*Republished by permission from the Sir William Osler Anniversary number of the Johns Hopkins Hospital Bulletin, July, 1919. Lord Baltimore Press.

sease," and he strove for the one with the Greek love of perfection, while for the other he had the passion of the truly adventurous spirit sailing on uncharted seas. To us who were his students in those early days, his memory is so vivid, so fresh, that it seems but as of yesterday when he worked and played in our midst, and we have but to close our eyes to see him in fancy, almost as clearly as we saw him in fact in the late '90's, the great teacher and the great student in his manifold relations to his students. Now we see him riding to the hospital in the Monument Street car, and to the group about him prophecying, with keen yet ever kindly vision, the ills,—physical, mental and spiritual,—of the derelicts en route to the dispensary; here in the wards demonstrating the complex psychology of Giles de la Tourette's disease, as exemplified by a poor bit of sodden humanity whose coprolalia but exemplified—in a way a bit embarrassing at times it is true—the symptom-complex he was discussing, or in an alcove off the ward playing with little Theophilia as she was emerging from the night of cretinism into the day of normal happy childhood under his skilful guidance; now in the class-room of the dispensary—for he loved the polyclinic, and believed in its wonderful potentiality as a teaching factor—with one deft touch solving a case of great complexity, or bringing from his vast storehouse of knowledge the one last link needed in a disease-picture hitherto poorly understood,—listening, suggesting, directing, teaching, guiding both student and patient, and all the while filling countless scraps of paper with the names of one of the three great teachers of his youth; now in the clinical laboratory studying a blood specimen, and suggesting to the student some line of original investigation which might, perhaps, light into flame the dormant investigator and research worker; now in the autopsy room studying in death the puzzles that he had helped to unravel during life; now walking through the wards and corridors of the hospital with a smile or an epigram for every doctor and nurse who passed, a kindly word, and his ever-stimulating psychotherapy—encouragement, optimism, hope—to every patient he saw; in his myriad activities always making each student feel that he also was but a student of health and of disease, of men and of morals, and yet such a student as to fire our minds, our souls and our bodies to renewed efforts so that we might, in some measure at least, prove worthy of this fraternity. To us who were privileged to be his students—his fellow-students

in those days,—he was—and still is—always our inspiration and always our model. In him the fire burned so brightly that no dross or tinsel could survive its pure flame, and he was ever "our cloud by day, our pillar of fire by night." With Bossuet he taught that "*le bon sens est le génie de l'humanitié,*" and he gave to us "a golden age which never rusts, a spring which never fades, eternal youth." Always true to himself and to others, he made us think daily of words of his beloved Plato,—"Whence has the progress of cities and nations arisen, if not from remarkable individuals coming into the world we know not how, and from causes over which we have no control?"

Is not the greatest tragedy of growing older the loss of our illusions—the discovery sooner or later that so many of the gods of our youth, Jove-like Olympians of those days when our world was young and pregnant with possibilities, have, after all, but feet of clay? But with "the Chief" this could never be. The more we learned, the more wonderful his boundless knowledge seemed; the wider our vision, the more limitless his appeared.

Everyone who had ever been his student was, as it were, still studying with him, or peripatetically following his footsteps as he journeyed through life, always teaching some new lesson of medicine or of living. Every honour that befell him enriched us and made us prouder of our brotherhood; every step upward or onward of his made our paths easier and the heights seem not so far away. We rejoiced in his happiness and in his honours, and perhaps he was helped in his sorrows by the knowledge that they were ours as well, for he had shown us how work could be made play, and how the real could be made ideal. Because of him our lives were better, our successes more real, our failures less hard to bear, for through the tangled skein that spells life each of us has known that in him we had had until his life ended, a teacher, a friend, and a true fellow-student.

EARLY DAYS AT THE JOHNS HOPKINS HOSPITAL WITH DR. OSLER

H. A. Lafleur, B.A., M.D.

McGill University, Montreal

IT is a far cry back to the opening of the Johns Hopkins Hospital in May, 1889. Through the vista of thirty-one years the recollections of the events and personalities of those early days of the hospital are inevitably blurred—the outlines have lost their sharpness, the colours have faded a little—all except those of two or three outstanding figures, Daniel C. Gilman, president of the university and hospital, William H. Welch, pathologist, and William Osler, physician-in-chief. It was my great good fortune to have been associated with Dr. Osler as first resident physician for two and a half years. I well remember the opening ceremony. It was a brilliant day, and notabilities, medical and otherwise, from Baltimore and the principal medical schools of America were grouped under the vast dome of the administration building to witness the inauguration of what was confidently believed to be the last word in hospital construction and management for the scientific study and treatment of disease. There was a feeling of elation—one might even say of exaltation—that the structure which had taken twenty years to evolve, absorbing the energies and thought of so many able minds, had at last become a *fait accompli*. And to none more than to Dr. Osler was this a red-letter day. To blaze a perfectly new road, untrammelled by tradition, vested interests, or medical "deadwood"—best of all, backed by a board of management imbued with a fundamental and abiding respect for scientific opinion and commanding an ample budget—what more could the heart of man desire? The days that followed were filled with the many details of organization. There were record forms and charts of various sorts to be devised, instruments of precision and appliances for diagnosis to be purchased, diet lists to be drawn up, and not least, a clinical laboratory to be furnished and equipped—the latter a temporary affair, as those who had planned the magnificent pile of buildings had omitted to make provision for this essential feature of a medical clinic. With all these matters Dr. Osler busied himself with his usual cheerful

JOHNS HOPKINS HOSPITAL, 1889

Upper Line (Standing): A. A. Ghriskey, J. M. T. Finney, A. C. Abbott, Hunter Robb, Clark, W. Hewson Baltzell; Seated (Middle Row): F. J. Brockway, William Osler, D. Meredith Reese, H. A. Lafleur, W. W. Farr; Seated on Floor: J. Allison Scott, H. Toulmin.

JOHNS HOPKINS HOSPITAL, 1891

CHIEFS OF STAFF, WITH RESIDENT STAFF

Standing (Left to Right): A. C. ABBOTT, A. A. GHRISKEY, W. S. THAYER, W. W. RUSSELL, H. A. LAFLEUR, HUNTER ROBB, WILLIAM OSLER, HENRY M. HURD, HOWARD A. KELLY, W. T. COUNCILMAN; Seated (Left to Right): D. MEREDITH REESE, W. HEWSON BALTZELL, W. S. ROOSE, W. W. FARR, GEORGE H. F. NUTTALL.

and untiring industry, and the thought that was uppermost was to have the best that could be obtained.

It would be idle to say that patients at once flocked in large numbers to the spacious and well-appointed wards. There can be no harm in stating now, at this distance, that the attitude of the general public of Baltimore was at first rather lukewarm toward the new institution. The Baltimoreans of that day were essentially clannish and "southern", and as most of the heads of hospital departments had been chosen from other centres of medical education in "the north", there was no immediate bond of union between the hospital staff and the public, who clung to their local medical authorities. It is only fair to state that this feeling has entirely disappeared, and that Baltimore is justly proud of its great hospital and medical school.

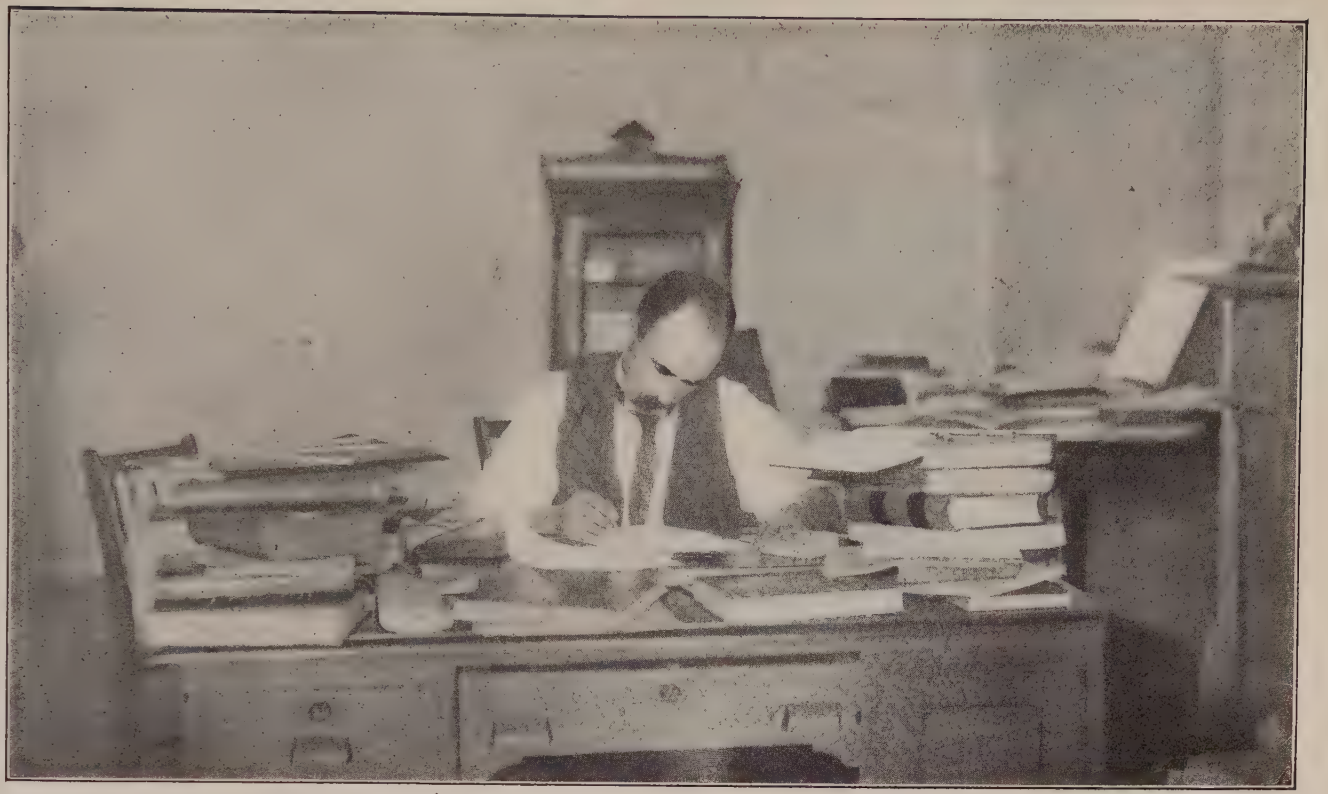
To no one more than to Dr. Osler—to his personal charm and tact, no less than to his great professional attainments, is due the credit of having "broken the ice" and established the most cordial and intimate relations between the general medical profession and the public of Baltimore and the Johns Hopkins Hospital. A humorous sidelight is thrown on the attitude of the more ignorant part of the public of those days by the rumor, current at that time among the coloured population, that each member of the staff of the new hospital had the privilege of "cutting-up a nigger", and one of our staff averred that he had heard a wayward and truant "pickaninny" warned by its mother to keep away from the neighbourhood, or the doctors would get him. This legend no doubt had its origin in the fact that the pathological laboratory was in operation for experimental work on animals some four or five years before the hospital was opened for the reception of patients.

The first indoor patient was an advanced case of thoracic aneurism, and when in the course of time he was transferred from the ward to the post-mortem room, with a full clinical report describing the site and extent of the lesion, and the secondary changes in lungs, heart, liver and kidneys, Dr. Welch was kind enough to remark that he had not been accustomed to receive from clinicians such accurate and complete diagnoses. It was not many weeks before the wards began to fill up, and as is often the way with new institutions, there were many cases of special interest—obscure cases which came as a last resort for diagnosis by a master in the art—and in many instances the hope was fulfilled. The organiza-

tion of an out-patient department, so essential as a feeder to the wards, was at first one of Dr. Osler's chief preoccupations, and this phase of the hospital's activities very soon attracted a large and appreciative public. Manned by an ample and competent staff of young men, working under the daily personal supervision of the physician-in-chief, and supplied with all the necessary instrumental and laboratory facilities, the department soon gained the confidence of the public by painstaking, accurate and thorough work.

Among the many instances in which Dr. Osler did good service to the medical profession of Baltimore, none was more conspicuous than his insistence on the diagnosis of malarial infection by microscopic examination of the blood, and *per contra*, the rejection of the term "malarial" in pathological conditions where no parasites were found after careful and repeated examinations. He repeatedly drew attention to the futility of quinine in large doses for ailments which had not been proved to be of malarial origin. He was the first in America to report the presence of amœbæ in so-called tropical dysentery, confirming the then recent discovery of this parasite by Kartulis in the endemic dysentery of Egypt. I well remember the day (in 1890) he brought to the clinical laboratory a specimen of pus from an abscess of the liver and lung, and after a short search detected motile amœbæ in large numbers. He was greatly pleased and enthusiastic about this find. The patient was a doctor who had contracted dysentery in Panama and on his way north had consulted Dr. Osler. As sporadic cases of dysentery were by no means uncommon in Baltimore, we all became keenly interested in knowing whether or not amœbæ would be found, and we soon were able to demonstrate them in a series of cases during the next year.

In this early stage of the Johns Hopkins Hospital there was no undergraduate teaching. The University had not sufficient funds to organize a medical school, and Dr. Osler's great gifts as a clinical teacher found no expression except in the instruction of a somewhat motley group of post-graduate students who came from far and near attracted by his reputation. Coming as they did from all sorts of medical schools—the poorer type of American medical colleges had not then been weeded out by judicious state legislation—it was inevitable that to many of his audience, seeking medical "tips" only, the mental pabulum provided for them was



"Work (hard) while it is day"

OSLER'S "PRACTICE OF MEDICINE" IN THE MAKING. JOHNS HOPKINS HOSPITAL, 1891

"caviar to the general", but there were always a chosen few by whom the storehouse of his rich clinical experience was fully appreciated. The most spectacular of the theatre clinics was on the occasion of the first administration in the hospital of Koch's tuberculin. A small supply of the precious (?) dark-brown fluid had been sent to America and distributed to a few well-known clinics with specific directions for its use. Under the spell of the great name of Koch, it was considered advisable to make a function of the administration of the first dose of what was then confidently expected to inaugurate an epoch in the history of tuberculosis. The executive head of the hospital, the chiefs of the various clinics, the house-staff and a large gathering of physicians from Baltimore and the vicinity assembled in the amphitheatre, and after some preliminary historical remarks by Dr. Osler and Dr. Welch, the writer proceeded to inject subcutaneously into an advanced consumptive what would now be considered a colossal dose of O.T.-and the gathering dispersed with mutual congratulations!

My impression of Dr. Osler as a clinical teacher is that he was at his best in ward-rounds rather than in theatre clinics. He seemed more at ease by the bedside than when delivering a clinical lecture. One could appreciate at the bedside his extraordinarily keen powers of observation and the almost uncanny *flair* he had for the case of rare disease—the result of wide reading combined with a most retentive memory of all he had seen in his vast and varied experience. He was not a fluent speaker—much less so than many lesser lights—and one missed in the spoken word the ease, elegance and brilliance so conspicuous in his writings.

It was in the spring of 1891 that the "Principles and Practice of Medicine" first took definite shape. It is safe to say that the project had long been in his mind, but it is probable his manifold activities while he was in Philadelphia prevented him from taking the leisure necessary for composition, while at Baltimore, at least in the early days, he had more peace and quiet for intensive literary work. Be that as it may, he waived the usual summer vacation—never a holiday in the ordinary sense of the word, for he was always busy with some aspect of his profession at home or abroad—and settled down to dictating his *magnum opus* to his secretary, and when not dictating, making voluminous notes for the next day's work. He labored in a special room of the administration building (it should have a suitable tablet recording the fact), far away from

the bustle of the corridors and wards, and as the summer wore on, could be found there, not infrequently in his shirt-sleeves (anyone who has spent a summer in Baltimore will understand why), working at high pressure early and late, an example of ceaseless industry and a marvel to his house-staff, to whom the ordinary routine of hospital duties seemed sufficient in that moist and suffocating heat.

On more than one occasion Dr. Osler, in a half-serious, half-jocular way, gave dark hints of a small, black, leather-bound and *padlocked* note-book, in which he was writing "The Inner History of the Johns Hopkins Hospital", and which was not to be published until after his death. So far as I am aware no one but himself had any idea of its contents, but knowing him one may surmise its wealth of anecdote, humor, wisdom and, possibly, pathos. It is to be hoped that his literary executors are in possession of this treasure and have explicit instructions to let it see the light of day in the near future.

No sketch of Dr. Osler's early days in Baltimore would be complete without some reference to his delightful home, then on West Monument Street. The social instinct was always strong in him, and his house was a rendezvous for medical men from far and near. It was an open house at luncheon time, and almost any week one might be certain to meet some well-known figure of the American, and often of the European, medical world at his table or at five o'clock tea. But it was not only the masters of the profession to whom he gave a welcome—his door and his table were open to the humblest practitioner who had need of his advice and care. He was always specially interested in younger men of promise, for whom his personal charm and easy geniality, no less than his professional distinction, had an irresistible attraction. By those who had the privilege of an intimate and daily contact with him in ward and laboratory, he will always be remembered gratefully and affectionately as "the Chief."

A PERSONAL APPRECIATION OF SIR WILLIAM OSLER*

J. M. T. FINNEY, M.D.

Baltimore

IT was my privilege to know Dr. Osler from the day when the Johns Hopkins Hospital was formally opened, May 7, 1889, and to be more or less intimately associated with him during the sixteen years of his connection with that institution as its first physician-in-chief, and the first occupant of the chair of medicine in the Johns Hopkins University Medical School. It was not my privilege to serve under him as an undergraduate or assistant, but I, like every other earnest student fortunate enough to have been attached to the staff of the Johns Hopkins Hospital in any capacity whatsoever during those golden years of opportunity, could not fail, in some degree, to come under the magic spell of his influence, so potently manifested wherever he happened to be, whether in Toronto, Montreal, Philadelphia, Baltimore or Oxford. It was an influence so subtle and yet so compelling that one could not remain in its immediate environment for any length of time without receiving in some form or other his lasting imprint. Who can do justice to such a man? Who can recount his virtues? He had no vices. Some faults he had, for he was intensely human. Who can properly evaluate his qualities of mind or heart, or measure the extent of his influence upon the profession of medicine? I can only indulge the hope that from my vantage point, a little removed from the close and intimate relationship of pupil and teacher, or assistant and chief, my perspective may be a little better, perhaps, than that of either of the former and that thus I may be able the more justly to appraise the qualities of head and heart of that truly great man, at the time of his death the recognized leader of his chosen profession, in whose honour and for the perpetuation of whose memory we have gathered here this evening.

Well do I remember that eventful day, May 7th, 1889, when the doors of the Johns Hopkins Hospital were thrown open to the

*Extracted by permission from an address read before the Los Angeles Medical Association; published, *Journ. Amer. Med. Assoc.*, 1921, lxxvii, 2013.

public. There had gathered a distinguished assemblage containing many notable personages, both lay and medical, representing the élite of the profession of the country, and the responsible citizens of Baltimore and vicinity. Among the prominent figures who were present was one on whom, perhaps more than any one else, were focused the attention and the interest of the assemblage. That man, a rather spare figure, a little below the average height; dressed immaculately; debonair, with a flower in the buttonhole of his Prince Albert; with coal black hair, just beginning to get a little thin over a high forehead indicative of great intellect, a flowing moustache, bright, piercing eyes in which lurked almost constantly a most engaging twinkle; a complexion rather sallow, yet suggesting good health and constitution; with quick and agile movements, indicating great nervous energy; and altogether giving the impression of a body under excellent control physically, endowed with great mental acumen and poise, and possessed to a marked degree of the sense of humour.

One of his especial characteristics was optimism; not of the foolish sort, which, ostrich-like, buries its head in the sand and says all is well when it surely is not, but the optimism which grasps every opportunity legitimately and wisely to turn the current of the patient's attention and thought from self and gloomy forebodings into more healthful and stimulating channels. Hope was the bright particular star to which he was constantly pointing in all his relations with his patients. It was the gospel he preached to his students. His writings are filled with it.

One of the outstanding characteristics of the "Chief" was his thorough understanding and interest in human nature. He, like Abou-ben-Adhem, loved his fellow man despite faults and frailties, toward which he was always willing to turn a blind eye or a deaf ear. At the same time, in a very tactful way and from some text thus furnished, he preached many a lay sermon which had a lasting effect for good on the patient, or the group of medical students and assistants, or the medical or lay audience, as the case might be, to whom it happened to be addressed.

In addition to this, there was developed in him that extraordinarily rare faculty, the capacity of making each individual patient feel that he was personally interested in his or her case, not by number but as an individual. This was not merely assumed interest with him, either: it was genuine. Those who knew him

best came to feel that to an unusual degree he was endowed with the love of his fellow men, both individually and collectively. This was one of the most potent of the impelling forces in his life and was largely responsible for the spirit of helpfulness that characterized his work.

The relationship between him and his students and his staff of associates was most cordial. Never was chief more loyally served or more thoroughly worshipped by his subjects than was Dr. Osler by those associated with him. Their relations were certainly ideal. To see Dr. Osler at his best, to get a glimpse of the real "Chief," of the many-sidedness of his character, of his wonderful memory for cases, of the inexhaustible storehouse of medical lore with which his mind was filled, his remarkable insight into disease and its protean manifestations, and to feel the magic spell of his presence and personality, one must watch him by the bedside of his patient, surrounded by his students. There he sits in the midst of them, with thoughtful mien, in characteristic pose, his exquisite hands palpating the patient or toying with a stethoscope or adjusting a recalcitrant cuff; alert, never missing an opportunity to direct attention to some point of interest illustrated by the case in hand, or to point out to the students some direction in which possibly addition could be made to existing knowledge by study and research. Nor was the opportunity lost to try, in his own inimitable way, to stimulate the desire for these things in the minds of his students.

He was a man of few words. He never expressed an opinion until he had acquainted himself fully with all of the available facts in the case. Then his opinion was stated in a few words, and to the point, so that it could be readily understood by every one. Taciturnity was one of his virtues. He cultivated it and earnestly advised its cultivation in others. He was never heard to speak ill of any one. Sometimes in righteous indignation he would enter a vigorous protest against some wrong or wrong-doer. Under such circumstances, he could express himself both vigorously and emphatically, and at times in truly picturesque fashion. This was his characterization of the "patent" or proprietary medicine "drummer," always a trial to his soul: "While many of them are good sensible fellows, there are others voluble as Cassio, independent as Autolycus, and senseless as Caliban, who will tell you glibly of the virtues of extract of the coccygeal gland in promoting

pineal metabolism, and are ready to express the most emphatic opinions on questions about which the greatest masters of our art are doubtful." What a delightful character sketch and how true we all know, to our edification and sorrow.

One of the cardinal principles of his life was the cultivation of equanimity. He preached this both in season and out of season and practiced it constantly, to the end.

As A Teacher

Dr. Osler had decided ideas as to the proper way to teach medicine, and these were not always in accord with prevailing methods. His ideas seems to have been influenced largely by the teachings of Louis, of whom and of whose methods of work he was an ardent admirer. He subscribed most heartily to the positive or modern method of the study of medicine by observation and analysis as distinguished from theory and dogma. He quotes with entire approval Louis' words:

"The edifice of medicine reposes entirely on facts, and truth cannot be elicited except from those facts which have been well and completely observed. To get an accurate knowledge of any disease, it is necessary to study a large series of cases, and to go into all the particulars; the conditions under which it is met, the subject specially liable, the various symptoms, the pathologic changes and the effect of drugs."

Listen to what he says further in this regard:

"In what may be called the natural method of teaching, the student begins with the patient, continues with the patient, and ends his studies with the patient, using books and lectures as tools, as means to an end. The student starts, in fact, as a practitioner, as an observer of disordered machines, with the structure and orderly functions of which he is perfectly familiar. Teach him to observe; give him plenty of facts to be observed, and the lessons will come out of the facts themselves. For the junior student in medicine and surgery, it is a safe rule to have no teaching without a patient for a text, and the best teaching is that taught by the patient himself. The whole art of medicine is in observation, as the old motto goes, but to educate the eye to see, the ear to hear, and the finger to feel, takes time, and to make a beginning, to start a man on the right path is all we can do. We expect too much of the student and we try to teach him too much. Give him good methods and a proper point of view, and all other things will be added as experience grows."

How much more rational, how much more effective this method with small groups of students than the old, now happily largely discarded, stereotyped lectures and text books, and reci-

tations with large classes, in which it is impossible to have that intimate and personal contact between teacher and student so helpful to each.

Reared, as he was in his early youth, in a clerical home atmosphere, influenced, as he himself says, more profoundly than by any one else, by three of his old teachers, one of whom was a minister, and another later to become one, Dr. Osler's writings and addresses bear unmistakable evidence of this beneficent influence.

Hear him while he speaks:

"As to your method of work, I have a single bit of advice which I give with the earnest conviction of its paramount influence in any success which may have attended my efforts in life. Take no thought for the morrow; live neither in the past nor in the future, but let each day's work absorb your entire energies and satisfy your widest ambitions. .....While medicine is to be your vocation or calling, see to it that you have also an avocation, some intellectual pastime, which may serve to keep you in touch with the world of art, of science or of letters. Begin at once the cultivation of some interest other than the purely professional. The difficulty is in a selection, and the choice will be different according to your tastes and training; but, no matter what it is, have some outside hobby. For the hard working medical student, it is perhaps easiest to keep up an interest in literature. Let each subject in your year's work have a corresponding outside author. When tired of anatomy, refresh your mind with Oliver Wendell Holmes; after a worrying subject in physiology, turn to the great idealists, to Shelley or Keats for consolation; when chemistry distresses your soul, seek peace in the great pacifier, Shakespeare; when the complications of pharmacology are unbearable, ten minutes with Montaigne will lighten your burden. To the writings of one old physician I can urge your closest attention. There have been, and, happily, there are still, in our ranks notable illustrations of the intimate relations between medicine and literature; but in the group of literary physicians, Sir Thomas Browne stands preeminent. The "Religio Medici," one of the great English classics, should be in the hands, the hearts, too, of every medical student. As I am on the confessional to-day, I may tell you that no book has had so enduring an influence on my life.....It was one of the strong influences which turned my thoughts toward medicine as a profession, and my most treasured copy, the second book I ever bought, has been a constant companion for thirty-one years."

Once more:

"It seems a bounden duty on such an occasion to be honest and frank, so I propose to tell you the secret of life as I have seen the game played, and as I have tried to play it myself. You remember in one of the Jungle Stories that when Mowgli wished to be avenged on the villagers, he could only get the help of Hathi and his sons by sending them the master word. This I propose to give you in the hope, yes, in the full assurance that some of you, at least,

will lay hold on it to your profit. Though a little one, the master word looms large in meaning. It is the open sesame to every portal; the great equalizer in the world; the true philosopher's stone which transmutes all the base metal of humanity into gold. The stupid man among you it will make bright; the bright brilliant, and the brilliant student steady. With the magic word in your heart, all things are possible, and without it all study is vanity and vexation. The miracles of life are with it; the blind see by touch; the deaf hear with eyes; the dumb speak with fingers. To the youth, it brings hope; to the middle-aged, confidence; to the aged, repose. True balm of hurt minds, in its presence the heart of the sorrowful is lightened and consoled. It is directly responsible for all advances in medicine during the past twenty-five centuries. Laying hold on it, Hippocrates made observation and science the warp and woof of our art. Galen so read its meaning that fifteen centuries stopped thinking and slept until awakened by the De Fabrica of Vesalius, which is the very incarnation of the master word. With its inspiration Harvey gave an impulse to a larger circulation than he wot of, an impulse which we feel to-day. Hunter sounded all its heights and depths and stands out in our history as one of the great exemplars of its virtue. With it, Virchow smote the rock and the waters of progress gushed out; while in the hands of Pasteur, it proved a very talisman to open to us a new heaven in medicine and a new earth in surgery. Not only has it been the touchstone of progress, but it is the measure of success in every day life. Not a man before you but is beholden to it for his position here, while he who addresses you has that honour directly in consequence of having had it graven on his heart when he was as you are to-day. And the master word is *Work*, a little one, as I have said, but fraught with momentous consequences, if you can but write it on the tablets of your hearts and bind it on your foreheads."

I have thus quoted at length from Dr. Osler himself because, while he is exhorting his students, he is at the same time revealing the innermost secrets of his heart. He is telling the secret of his great success, the reason why he was able to accomplish the wonderful work that he did, and how it was that he gained the pinnacle of fame which was his. Yes, Dr. Osler was pre-eminently a teacher. He would have made a wonderful preacher. He possessed to an unusual degree all the qualifications and characteristics necessary for success in this exalted calling, for so it is. He recognized and appreciated this fact, and it influenced greatly his whole career. Ever stimulating and inspiring, ever urging higher ideals, ever encouraging by his example and methods; never taking advantage of his position to humiliate a student before his fellows or his patients; never himself causing nor allowing any one else in his presence to cause unnecessary physical or mental pain or discomfort by rough handling, or the brusque, sometimes even brutal expression in the patient's hearing of opinions concerning a diagno-

sis of malignant or other disease with fatal or discouraging prognosis. His tactful replies to embarrassing questions of patients or of over-anxious members of the family; his successful escapes from verbal encounters with neurasthenics and psychasthenics, leaving them bewildered, perhaps, but for the moment at least satisfied, are proverbial. He was always suggesting to the student new lines of investigation and work, new problems to engage his attention and activities. He was always interested in the progress made by the student in these directions, and, when anything worth while was developing, showed great interest in its prompt publication. It was just here that he displayed pre-eminently that quality unfortunately not universally present in teachers, namely, the insistence on the fact that whatever credit was due from the work done should belong alone to the one who did it, he taking no share in it to himself. Is it any wonder, then, that his influence on his students and associates should have had the happy effect which it did, and should have been rewarded by the development among them of teachers and masters who have since followed gratefully in his footsteps, illustrating, to a greater or less degree, in their lives and methods the principles he so eloquently preached and so faithfully practiced?

OTHER ACTIVITIES AND INTERESTS

Dr. Osler was a citizen of three countries and loyal to the best traditions of them all. He took an active interest in all the civic problems involved in this citizenship, especially those having to do with public health. Tuberculosis early engaged his thoughtful attention, and much of his best work was done here. He was tremendously interested in all matters pertaining to hygiene and sanitation. The control of communicable diseases, pure water, a good milk supply, children's playgrounds, every movement, in fact, that had to do with improved living conditions and made for the upbuilding of humanity, found in him an ardent champion.

Attention has already been called to the fact that Dr. Osler was constantly urging students to have a hobby. His was books, old books, especially first editions. Many of his students retain vivid recollections of the delight with which he would exhibit in his own study, or at the meetings of the Historical Society, some rare old volume and fairly gloat over it as he recounted its history, gave the biography of its author and appraised its literary and

scientific value with the authority of the connoisseur that he was. His collection of old books at the time of his death formed a library of great value, and along certain lines was second to none in existence. It was a source of intense satisfaction to him that his son, Revere, had inherited in large measure this same trait.

Dr. Osler was a firm believer in the high mission of the medical profession, and in the opportunities which it affords to those of its members who are able to appreciate and take advantage of them. He was an uncompromising foe to chauvinism and its offspring, which he characterized as "nationalism, provincialism and parochialism." Especially does he inveigh against that unfortunately all too common variety that takes the form of professional jealousies and contentions among medical men, often leading to undignified and unprofessional conduct. He consistently held the position that there was no more high-minded body of men to be found than that which composed the medical profession, and that it was unseemly and unbecoming to engage in personal and professional disputes and controversies which could only tend to discredit the profession in the eyes of the public, and breed bitterness and hatred in the minds of those who indulged therein. Instead, he was always counseling against too hasty judgment of the actions of a *confrère*, especially as reported by a patient, however well meaning he or she might be, because so often such remarks are unintentionally misquoted and such actions misconstrued. "Never let your tongue say a slighting word of a colleague. It is not for you to judge. Let not your ear hear the sound of your voice raised in unkind criticism or ridicule or condemnation of a physician. If you do, you can never again meet that man face to face. Wait, try to believe the best. Time will generally show that the words that you might have spoken would have been unjust, would have injured a good man and lost you a friend, and then, silence is such a powerful weapon" (Thayer). Could you imagine more valuable advice for the student, or for us medical men, to receive than this? and the best part of it all was that Dr. Osler never preached what he did not practice. His own life was the best illustration of his precepts.

SENSE OF HUMOUR

Dr. Osler's sense of humour, to which reference has been made before, was so fine and subtle that he was not infrequently mis-

understood by his more matter-of-fact audience, "the dull, stupid public," as he was so fond of characterizing it. He was always most felicitous in his quotations and his similes. It was here that his keen and discriminating sense of humour found expression. His characterization and description of men and things were notorious. Listen to this classification of the various types of professors: "It was a parson," he says, "who gave the well known libelous division of doctors: (1) those that talk but doe nothing; (2) some that can doe but not talk; (3) some that can both doe and talk; (4) some that can neither doe nor talk, and these get most monie."

Often when apparently writing in a most humorous vein, he has been the most serious in his meaning, and how often and with what delicate touch does he expose some of our human faults and foibles (Brush). Listen to this homily addressed to a class of graduating students:

> "Curious odd compounds are these fellow-creatures at whose mercy you will be; full of fads and eccentricities, of whims and fancies; but the more closely we study their little foibles of one sort or another in the inner life which we see, the more surely is the conviction borne in on us of the likeness of their weaknesses to our own. The similarity would be intolerable if a happy egotism did not often render us forgetful of it. Hence the need of an infinite patience and an ever-tender charity toward these fellow-creatures; have they not to exercise the same toward us?"

PRACTICAL SIDE

With all of his fondness for humor and the bright side of life there was an intensely practical side to all of his teaching. Art for art's sake, science for science's sake, work for mere work's sake, did not appeal to him. The medical man should always be inspired and his work should have as its ultimate aim the benefit of humanity, some addition to the sum total of human knowledge, the cure of disease, the prolongation of life. "The knowledge," (he quotes), "which a man can use is the only real knowledge, the only knowledge which has life and growth in it and converts itself into practical power. The rest hangs like dust about the brain or dries like raindrops off the stones."

HUMAN SIDE

The human side of Dr. Osler was perhaps, after all, the most attractive. Dr. Welch has well said of him, "To Osler nothing

human was foreign." It is a curious fact that while many praise his scholarship, his ability as a physician along practical or scientific lines and his stimulating leadership, yet all, with one accord, unite in acclaiming him as a man among men. This factor played a large part in the phenomenal success which has crowned his career. His habit was essentially peripatetic. He never remained long enough in one place to become moss-grown. He felt the need and recognized the beneficial effect on his work of new surroundings and fresh pastures. He never bothered himself about the past, still less about the future; the present alone interested him. "Sufficient unto the day is the evil thereof" was the text from which he preached many an effective sermon.

HOME LIFE

The home life in the Osler household was ideal. Every one will testify to this fact who was fortunate enough to have enjoyed its unostentatious hospitality. The "Chief," always interesting, seemed even more so in the unconventional freedom of the home atmosphere. Lady Osler made a charming hostess. Many a homesick student will recall with pleasure her gracious kindness to him, a perfect stranger, and her spontaneous and genuine cordiality which made him forget himself and feel at once at home. Those student Saturday night conferences in the Osler home, with their close and intimate contact with Dr. and Mrs. Osler, and the stimulus received there to higher planes of thought and action are never to be forgotten by the happy participants.

To Dr. Osler more than to any one else was due the inauguration of the student conferences in the homes of the professors and instructors. It was in these gatherings that the teacher came to know the students personally. They formed the basis for the intimate and lasting personal friendships and for the *esprit de corps* which has always been a distinguishing characteristic of the Johns Hopkins School.

INFLUENCE

As to the influence of Dr. Osler's personality exerted through his students, and the effect of his teaching and writings on medical thought and education, sufficient time has not as yet elapsed to admit of a just appraisal. This must be left for a future generation, with a better perspective and a longer time to judge of results.

I, with a thorough realization of my inability to judge as to the question of the permanent place that will be occupied by Dr. Osler in medical history, nevertheless venture to express as my opinion that, when the history of the time in which he lived comes to be written, the record of Dr. Osler's achievements as the foremost physician of his day, as investigator, teacher, author, historian and man will fill a large place.

His insistence on the fundamental relation of accurate observation and analysis of facts to the proper study of medicine, first enunciated in the French school in the early days of the last century, and later emphasized and popularized by Louis, did much to bring about its firm establishment in our system of medical education. The emphasis that he placed on historical, biographic and literary, as well as the strictly scientific subjects, has greatly broadened the outlook and widened the horizon of the medical men. His influence ever tended to humanize the study of medicine and to make it more fully meet the needs of humanity, and so fulfil its high mission.

Of Dr. Osler's literary style it has been well said that his own estimate of some of the old writers may, with equal truth, be applied to him: "a rare quaintness, a love of odd conceits, and the faculty of apt illustration." There is a clarity of diction, a charm of expression, an epigrammatic style in all his writings that stamp them with a certain individuality that must leave a lasting impression on medical literature. Indeed, it can already be observed in the writings of some of his former pupils.

If one were to enumerate those traits of Dr. Osler's character most likely to affect permanently medical thought and practice, one would mention industry, accuracy, honesty, kindness and humanity, as perhaps the most prominent. In his writings and teachings, he ever dwelt on these cardinal virtues, with an intensity that could not fail to have a lasting and marked effect on his students. While in practice, always more potent than precept, he was a living and shining example known and read of all men, of the doctrines he professed. One of Dr. Osler's students, from among those best able to judge, gives this estimate of his work:

"No one has written more sympathetically or more consistently of the changes underlying the manifestations of disease; no one has recognized more clearly the boundary line between the

known and the unknown, or sifted more judiciously and unerringly the truth from error."[1]

Not the least of Dr. Osler's virtues was his ability to harmonize opposing factions and opinions among medical brethren and associates. He was ever, whether in Canada, the United States or England, to be found using his great influence in the bringing together of warring factions, in clearing up misunderstandings, in bringing harmony of action to opposing interests. This was equally true of individuals as of organizations, medical schools and societies, as well as of medical associates. Himself a friend to every one, a supporter of no special faction, identified with no party, he was always in a position to suggest a middle ground on which both sides to any controversy could find a common meeting place. He could do this because he had the confidence equally of both parties to the strife, who, for this reason, and knowing full well his disinterestedness, were usually ready to listen to his counsel and follow his advice.

It was a curious coincidence, the irony of fate, which has been so often observed among medical men, that Sir William should himself fall a victim to one of the diseases that had engaged his especial attention and had been the subject of so much study and thought on his part for so many years. He contracted pneumonia, that disease which he was wont so often to characterize as "the old man's friend," because it provided a comparatively quick and painless exitus, especially for those of advanced years. With characteristic cheerfulness, a few days before his death, he sent to his friends in Johns Hopkins a Christmas message of hope and cheer, in which he said he was making a good fight. But all the while he himself, either by intuition or with his wonderful insight into disease processes, must have known and felt that the end was approaching; for, shortly before his death, he wrote thus to an intimate friend: "The harbour is not far off and such a happy voyage, such dear companions all the way, and the future does not worry. It would be nice to find 'Isaac' there with his friends—Isaac Walton and others."[2]

His system of philosophy, which he had consistently preached and so faithfully practiced throughout a busy and fruitful life, had

[1] MacCallum.

[2] "Isaac" was the nickname that Dr. Osler used for his son, Revere, because he was so fond of fishing and kindred pursuits.

served him to the end. In the hour of triumph and success, it had helped him to bear with becoming humility all the honours that were heaped on him by an appreciative and admiring profession on both sides of the Atlantic. In the hour of trial, when grief-stricken and crushed to earth by the greatest of all sorrows that could have come to him, the untimely death in the World War of his only son, a youth of unusual promise, the pride and joy of his heart, he was still able with a supreme effort to manifest that "equanimity," about the virtues of which he had so eloquently discoursed in times gone by. Even "in the valley of the shadow of death," this quality of equanimity, and "the rod and the staff," with which he had been made familiar from his youth up, combined to comfort him.

CONCLUSION

Thus ended a life crowded so full of good deeds and noble aspirations that there never was any room for the low, the base or the sordid. So busy was he trying to wrest from Nature the keys to some of her hidden mysteries, so filled with his love of humanity, so understanding of all its weaknesses, so appreciative of its strength, so ready to extend a helping hand to any one in need, so overflowing with hope and good cheer that it continually radiated from his presence. Small wonder, then, that he was the most loved of men. He was the embodiment in his own person of "Luke, the beloved physician" of Holy Writ, with which he was so familiar and which he loved to quote, and continually did quote with such happy effect. Thus he lived and thus he died, true to himself, true to his philosophy, true to his traditions, having reached that height for which true men have ever striven and will continue to strive, and which it is granted comparatively few to attain, where it can be truly said of each, "He added something to the sum total of human knowledge, he left the world better for having lived in it."

Nor sun, nor moon, nor stars can shed more light on
humankind than one grand life.

OSLER*

WILLIAM S. THAYER, M.D., LL.D.

Baltimore

AS the accumulating tragedies of the aftermath of war gather fatally one on another, a puzzle and a mystery to the thoughtless masses whose imperfect eyes seek in vain for the cause, the old dead ache that we have borne for these last interminable years, the old dead ache that it is our dream to outlive breaks out now and again in new and cruel crises. Such a crisis was the death of Sir William Osler, as much a tragedy of the war as if he had fallen by the side of his boy, "forward as fits a man."

Son of a canon of the Church of England, born in Bond Head, Ontario, in 1849, he was at the outset destined for the clergy, but his inclination carried him toward medicine, and he graduated at McGill University in 1872. His academic career thereafter at Montreal, Philadelphia, Baltimore and Oxford, has been fully outlined elsewhere in this volume. Wherever he went his devotion to work, his remarkable power of observation, his extraordinarily quick grasp of the significance of that which he saw or read, his clear vision and sound, sane judgment, his simplicity and sincerity and honesty impressed his colleagues and the public, and he came to be much sought for as a consultant. In 1892, after a year of intensive work, he published his treatise on "The Practice of Medicine," which, largely because of its rare personal quality, because it represented the fruits of actual observation and experience, has been for so many years the standard text-book of medicine in America. He delivered many lectures before learned societies, the Goulstonian lectures in 1885, the Cartwright lectures in 1886, the Harveian lecture in 1906. He published a number of short volumes on different medical subjects—and a very large number of notes on a great variety of pathological conditions, and he was the author of a number of charming and valuable historical and biographical essays.

His work in the organization of the new medical clinic at the Johns Hopkins Hospital in 1889, his insistence that, for the proper care of the patient as well as for the improvement of the teaching of medicine, the student should be used, as in England and France, as an assistant in the wards, and his practical abandon-

*Extracted from *The Bull. Med. Chir. Fac., Maryland*, 1920, xii, 78.

JOHN HOPKINS HOSPITAL INTERNE STAFF, 1892.

Left to right: Standing—Drs. Carroll, John G. Clark, Werckmeister, Thomas S. Cullen, Otto G. Ramsay, A. P. Oppenheimer, Chauncey Smith, George Blumer, Sydney M. Cohn, Joseph C. Bloodgood, James F. Mitchell; Seated—Drs. Wm. W. Russell, Lewellys F. Barker, Hunter Robb, Henry M. Hurd, William Osler, Simon Flexner, Wm. S. Thayer; Seated on ground—1st unknown, Drs. Harold C. Parsons, J. Ernest Stokes, John S. Billings Jr., Rupert Norton.

Note.—"Horse" or George Edwards, is the name of the 1st unknown seated on the ground.—ED.

ment of barren didactic methods were steps of great importance in the advancement of medical instruction and in the improvement of hospitals in America. These were notable achievements; they have been abundantly recounted. But if one turns to the notes of those who knew him and were close to him, such as the tributes by eighteen of his associates in the *Johns Hopkins Hospital Bulletin* for July, 1919, he may perhaps be struck by the lack of stress laid on the scientific and material aspects of his work; for it was in the human side of this man that lay his true greatness. It is probable that there has, in America, been no medical man so universally revered, no man whose power, whose inspiration has reached so many, no man so loved. Wherein lay the secret of this power? What was the manner of the man?

His father was Cornish, and Osler was a true Celt. A Celt in appearance, not large, of a very dark, almost olive complexion, with a rather long, drooping black mustache—a Celt in his charming vivacity and brilliancy and in his sparkling wit. Not large, but well built, with a wiry, athletic figure, a long, swinging, active gait, a peculiarly mobile face, serious and almost stern when at rest, with deep, dark brown eyes with an irresistible humorous twinkle; deep clear eyes, so clear that although they might sometimes seem unfathomable, they told at a glance of a pure, kindly, loyal spirit behind. As a teacher he was wholly simple and devoid of circumstance or of the least attempt at studied eloquence or theatrical effect. He taught mainly by the bedside. His alert eye missed little. His few, kindly, often droll words gained the early confidence of the patient, and kept the student on his tiptoes. His talks in the wards were replete with epigrams. The right adjective, often quaint and unusual, was always on the tip of his tongue, and to a rare degree he possessed the power to inspire in the patient confidence, courage, and hope; in the student, enthusiasm.

The equanimity that he preached he exemplified. "Let not the *Crooked Things* that *can't be made streight* encumber you," said Cotton Mather.* Few followed this wise maxim as did Osler. Of the hopeless and irritating dilemma he always saw the humourous aspect and 'twas dismissed in the twinkling of an eye, with the one word that might almost—indeed sometimes did—accomplish the seemingly impossible. These "Oslerisms," as his

**Manuductio ad ministerium*, etc. 12°. Boston, Hancock, 1726, p. 147.

disciples called them, were a delight to his pupils. Indeed, at one time two had almost published a collection.

Plus je songe á la vie humaine, plus je crois qu'il faut lui donner pour témoins et pour juges l'Ironie et la Pitié, comme les Egyptiens appelaient sur leurs morts la déesse Isis et la déesse Nephtys. L'Ironie et la Pitié sont deux bonnes conseillières; l'une en souriant, nous rend la vie aimable; l'autre, qui pleure, nous la rend sacrée. L'Ironie que j'invoque n'est point cruelle. Elle ne raille pas ni l'amour ni la beauté. Elle est douce et bienveillante. Son rire calme la colère, et c'est elle qui nous enseigne a nous moquer des méchants et des sots, que nous pouvions, sans elle, avoir la faiblesse de haïr.*

This gentle "*Ironie,*" for which we have no word in English, this gentle "*Ironie*" which neither wounds nor embitters—how well he understood it! In nearly thirty years of friendship, in fifteen years of daily association with Osler, I never heard from his lips an unkind word about a brother practitioner. He saw and appealed to the best in every man. More than this, no one could speak ill of his neighbour in his presence. He who forgot himself once never did so again. One evening among the group of students who gathered about his table on Saturdays, an old college mate began to ridicule a col eague. In a moment Osler turned, and pointing to the photograph over his fireplace, said: "Do you not think that Innsbrück statue of King Arthur a fine figure?" The colleague flushed, the students shivered, the subject changed. And it was ever so.

He loved his fellow men and they loved him. His table was always filled with passing guests: colleagues from a distant point, the country doctor, the student who, coming to visit the clinic, was stunned to find himself carried away to luncheon with the great man that he had expected only to listen to from afar. "The master word in medicine," he said in one of his most beautiful addresses, "is work." But efficient work, he says in another, means inevitably system. He knew not idleness, and he put into his life and maintained in a manner which can only be described as masterful, a remarkable system.

At seven he rose; breakfast before eight. At a few minutes before nine he entered the hospital door. After a morning greeting to the superintendent, humming gaily, with arm passed through that of his assistant, he started with brisk, springing step down the corridor toward the wards. The other arm, if not waving gay or humourous greetings to nurses or students as they passed, was

*Anatole France: *Le Jardin d'Épicure*, p. 121.

thrown around the neck or passed through the arm of another colleague or assistant, and by the time the ward was reached, the little group had generally grown like a small avalanche.

The visit over, to the private ward. For the many convalescents, or the nervous invalid whose mind needed diversion from self, some lively, droll greeting or absurd remark or preposterous and puzzling invention, and away to the next in an explosion of merriment, often amid the laughing but vain appeals of the patient for an opportunity to retaliate. For those who were gravely ill, few words, but a charming and reassuring manner. Then, running the gauntlet of a group of friends or colleagues or students or assistants, all with problems to discuss, he escaped. How? Heaven only knows!

A cold luncheon, always ready, shortly after one. Twenty minutes rest in his room; then his afternoon hours. At half past four, in the parlour opposite his consulting room, the clans began to gather, graciously received by dear "Mrs. Chief," as Lady Osler was affectionately known. Soon the "Chief" entered with a familiar greeting for all. It was an anxious moment for those who had been waiting long for the word that they had been seeking with him. After five or ten minutes he would rise, and perhaps beckon to the lucky man to follow him to his study. More often he slipped quietly from the room and in a minute reappeared at the door in his overcoat, hat in hand. A gay wave of the hand, "Goodbye," and he was off to his consultations.

Dinner at seven, to which, impartially and often, his assistants were invited. In the evening he did no set work, and retired early to his study where, his wife by the fire, he signed letters and cleared up the affairs of the day. Between ten and eleven o'clock, to bed. Such were his days. Three mornings in the week he took at home for work. He utilized every minute of his time. Much of his summer vacation went to his studies. On railway, in cab, on his way to and from consultations, in tramways, and in the old "bob-tailed" car that used to carry us to the hospital, book and pencil were ever in his hand, and wherever he was, the happy thought was caught on the wing and noted down. His ability at a glance to grasp and to remember the gist of the article that he read was extraordinary.

His power to hold the mastery of his time was remarkable. There was more to be done in the day than he could accomplish.

The kindliest of men, he would willingly have given more time to others had it been his. It was not. There was but one moment in the day in which he could talk to his assistants and colleagues of their affairs, tea-time, and that which followed, if, by chance there were no outside consultation. When could one see him for a minute? "At tea"; and generally there *were* outside consultations. Men tried to catch him at other times. It was impossible. No one could hold him. He escaped as by magic, but so graciously, so engagingly that, despair though one might, he could hardly be irritated. No one could speak consecutively to Osler against his will. How did he do it? I know not. For the great world he had no time. He gave none to society. But at medical meetings and at gatherings of his colleagues, he was a constant attendant and a central figure. Too often these gatherings trailed on to late hours, but before one knew it, by ten o'clock he was gone.

His humour was irrepressible. It cropped out in everything. Now it was in medical articles, published under an amusing pseudonym, which were excruciatingly funny—reports of amazing cases, subjects which could lead no man astray, but have been seriously and solemnly quoted. Now it was a sly thrust at a colleague in the absurd title of a medical paper which mysteriously found its way into the programme of a society meeting. Now it was the elaborately prepared counterfeit of a new journal, presented at a dinner, with a whole table of contents which brought horror to the hearts of the victims—and the rest a blank. His assistants had always to be on their guard. The genial practical jokes played on his friends were endless, and so notorious that, alas, they have grown sadly with repetition. In a tight place he would pass under his *nom de plume*, unknown to the puzzled bore who had sought to nail him down. His generosity to his assistants was unending, and almost every gift, every act of kindness was accompanied by some droll and often really humorous mystification.

Wherever Osler went the charm of his personality brought men together; for the good in all men he saw, and as friends of Osler all men met in peace. Under his inspiration the Medical and Chirurgical Faculty of Maryland took on a new life, and a new harmony reigned among all about him.

Throughout all his life Osler was a student of the lives of

those who had gone before. Biography was to him of compelling interest, and in his numerous biographical essays, some of which have been collected in "An Alabama Student," he stimulated in his students a reverence for the great names of medicine, and an interest, sometimes as deep as his own, in the search for the recondite in the history of our art.

But above all this Osler was a scholar. In early life he had given little time to the classics. But few men have lived more completely in the atmosphere of the great minds of the past. An insatiate reader, his memory was remarkable, and the timely and happy quotation was always on his lips. Nightly, for half an hour, he communed with that which was best in literature. He loved books, and early laid the foundations of the great collection which was his at the time of his death—a collection, at the outset, of the first editions and early publications of the masters of medicine and later of like treasures in all branches of science and the humanities. At the time of his death he had accomplished the impossible—Osler, doctor of medicine and practitioner of his art, was president of the British Classical Association.

His occasional addresses, collected in part in "Æquanimitas and Other Addresses," were the mirror of his own ideals and his own character. Written in an engaging and forceful style, they contain much that is beautiful. But that which is more beautiful and more impressive than the words is the thought that Osler lived and practised to the letter the precepts that he preached. He rarely spoke of himself, but at the great farewell dinner in New York he talked briefly and touchingly of his ideals. These ideals he realized.

Some have criticized Osler for his reluctance to enter into combat against that of which, in his heart, he disapproved; some were inclined to regard him as one who shunned disagreeable complications rather than facing them. Osler did hate and shun useless strife, but when the time came—and he was a very wise judge of the proper moment—no one was more fearless or more outspoken than he, as more than one of his colleagues may remember. When the word must be spoken, he was ready to speak it regardless of what it might mean for himself.

His home life could scarcely have been more beautiful, and Lady Osler was no less dear than he to the immense circle that came to call them their friends. In Britain as in America, Osler's

charm and brilliancy, his learning and his skill brought him the same universal affection and respect. He was made a baronet, a deserved honour. His house at Oxford became the Mecca of Americans. His hospitality knew no bounds. Sometimes forty or fifty guests would gather for afternoon tea.

There was but one child, Edward Revere Osler, a lad of but ten when they left America. In this boy Osler's life was centred. Always attractive and fond of outdoor life, he developed into a singularly charming character, with an interest in and an understanding of that which is beautiful in art and literature rare in one of his age. He began to collect books and to collect them intelligently. To his father this development was an inexpressible joy.

Surrounded by honours and love abroad, and with perfect happiness at home, a figure of growing significance among his colleagues of the old university, active in his profession and in the gathering and cataloguing of his wonderful library, the sky was clear—and the war came.

Whole-heartedly and without a bitter word, he gave himself as ever to the duties of the hour. In the medical department of the army his advice was sought on all manner of questions. He was consultant to a number of hospitals and in our hours of hesitation and delay he was active in stimulating his old students to come to the aid of those who were fighting our battles. Lady Osler was no less active than he. The boy first worked at a hospital in France, then entered the Training Corps, joined the artillery, and left for the front. It was a strange picture, this man who all his life had been the apostle of "Unity, Peace and Concord" ("Æquanimitas and Other Addresses," p. 447) flung suddenly with all that was nearest and dearest into the vortex of war. True to his own precepts he consumed his own smoke; there was never a lament or a complaint. But in his letters to those near to him the ever present anxiety for his boy was manifested by the inevitable reference made in brave, cheerful words to the sword that hung over their heads.

In August, 1917, cruelly wounded, Revere died, cared for, mercifully, by dear friends who chanced to be at his side. The blow Osler bore with calm dignity and beauty. The old life continued; his house, as ever, was open to all. In the last year of his life over sixteen hundred guests sat at his hospitable board. But

it was a crushing blow from which he never recovered, and it killed that exuberant vitality which had promised so many long and fertile years. With the same old cordiality he greeted his friends, with the same outward air of enthusiasm he went about his many activities. His address as president of the Classical Association was a contribution in which those who strive for the maintenance of high standards of scholarship in medicine will long take comfort.

The twelfth of July was his seventieth birthday. Two volumes of contributions to the medical sciences prepared in his honour by pupils and friends were presented to him by his colleague Sir Clifford Allbutt. His old students and companions in Baltimore united in dedicating their affectionate tributes to the beloved master. Testimonials of gratitude and affection poured in upon him from all sides. On few in their lifetime has such honour and love been showered. He was deeply moved. But his heart was broken. And when the test came, the old bodily vigour and resistance were gone.

In his last days he remembered as ever his associates of former years. Week by week he dictated or wrote letters from his sick-bed first to one and then to another of his old friends. And when he could no longer write he asked those by him to write in his stead.

He was a keen observer, a brilliant clinician. His contributions to medicine and medical education were important. He was a great teacher. But his main strength lay in the singular and unique charm of his presence, in the sparkling brilliancy of his mind, in the rare beauty of his character and of his life, and in the example that he set to his fellows and to his students. He was a quickening spirit.

At the meeting following his death, the Medical and Chirurgical Faculty of Maryland adopted this minute:

Died
on 29th December, 1919, at Oxford,
WILLIAM OSLER, Baronet.
Physician, teacher, guide, lover of his fellow man.

Noble exemplar of charity and tolerance and temperance and work and love;

Untiring stimulator and generous benefactor of this Society;

Whose sparkling wit and genial, subtle humour smoothed the rough way of life for so many weary spirits;

Whose presence banished discord and suspicion.

The gap which his absence leaves among us will forever be warmed by the glow of that all-embracing love which radiated from his presence like a halo of light, and brought to all about him something of the peace that now is his.

REMINISCENCES OF SIR WILLIAM OSLER

(Johns Hopkins Period)

Charles P. Emerson, B.A., M.D.

Indianapolis, Indiana

IT was my privilege first to meet Sir William Osler, then Professor Osler, one evening of September, 1895, in Levering Hall, at a reception given by the faculty of the Johns Hopkins University to the newly matriculated students. He sent an upper classman to find and to bring me to him. That was just like him. He knew how much that would please a young man. Doubtless he met that evening in just that manner all of those medical students who had recently been introduced to him by letter, and doubtless we all felt equally flattered. He was standing alone beside a long table. I remember that he wore a dark grey Prince Albert coat. His greeting was quiet, yet cordial. Almost his first words were, "Mrs. Osler is expecting you." He said very little, but he looked me over with an expression of very keen scrutiny, yet one which did not offend since it also was so friendly. It was an expression which I have never forgotten. I never saw a face like his. We often wondered if what we read there was the product of our imagination begotten of our admiration and affection; but the answer came seven years later in Paris. He had not seen the hospitals of that city for several years and so visited several. We entered the outpatient department of one in the morning while the medical clinic was at its busiest. This occupied a large single room in which were crowded doctors, students and the patients, both those being cared for and those awaiting their turn. Four patients just then were being examined, each in a different part of the room and each surrounded by a group of doctors and students. No one there knew Dr. Osler; no one of them had any idea who this stranger was. He was not introduced; in fact, he did not speak a word; and yet from the time he entered the room it was evident that many of the doctors there were interested in him. As he moved about the examinations stopped, the groups opened and the doctors signified by gestures that he was welcome to examine the patients. He was there not over ten minutes. When I held the door open for him and Dr. Jacobs to pass out, looking back I

noticed that all the work in the room had stopped and that many were following him with inquiring eyes as he passed through the door. Two evenings later the interne group of another hospital, which he had visited that evening, spoke of him frequently during the dinner with admiration, using such phrases as "What a remarkable face", "What sympathy"! I had for weeks belonged to that interne group and am sure that until that day they had known of Dr. Osler scarcely more than his name. I am also sure it was not their custom to speak enthusiastically of visiting doctors, especially of those from other countries.

A few days after that first reception an invitation to dine came from Mrs. Osler. The doctor, as was his custom, had a book beside his plate which he opened frequently during the meal, read a little and commented on what he read. Before he began one could not but be a little surprised to note that the book of that evening's dinner was Alexander Cruden's Concordance to the Holy Scriptures. It soon developed, however, that Dr. Osler's interest was in the introductory chapter which contained the story of the life of Cruden, a story which gave concrete illustrations of the treatment which some patients with nervous and mental troubles had received two centuries ago. Dr. Osler frequently emphasized the importance of an accurate knowledge of the history of medicine if one is to understand the medicine of his own day; and also, if one is to understand the medicine of any given period, the importance of some knowledge of what the men of that period were thinking about and what they were doing. He asked me what I had been reading and got a very discouraging reply. He said "You should at once read Milton's Areopagitica". The reason for this advice to one interested in medicine was at first not evident, but now it is very clear. It was at that same dinner that we first heard him say that young medical men should make an early start in and do the bulk of their research work, that is, of their constructive work, before they were forty years of age; that after that is the time to publish it and to teach. He expressed this opinion in various ways during the following years, and very good advice it is to young men who are just beginning their University careers.

Dr. and Mrs. Osler frequently entertained at dinner the members of his staff, and those hours were of rich value to each of their guests. He always led the conversation and on a very

high level. While we learned much of the history and literature of medicine, of the men whom he had known, of the various universities with which he had been connected, yet he inquired much of our lives, work, ambitions, etc. and discussed our futures at length. Young men who have worked together for some years are often inclined to gossip or to make critical remarks of mutual acquaintances but if we did at that table we were very certain to receive a quick and sometimes a stern rebuke. Pointing to a spot (blank) on the wall just near the ceiling he would say, "Do you not see that motto up there? 'Never say here of others what you would not say were they present'". He was a very accurate judge of men and we knew just about how he felt of some, but we never heard him speak unkindly of a single person no matter how much we knew they might merit it.

Dr. Osler was a born teacher, but his ability in that line was quite as much the result of the hard discipline to which he had subjected himself. He frequently mentioned this in order to encourage us. He studied his assistants very carefully, discovered their weak points and tried to help us to correct them. He discovered mine very early, and during the five years that I was on his staff he frequently during ward-round made remarks concerning patients which I knew were in part intended for me. In teaching he seldom used the lecture method. Instead, he discussed graphically just what the history and the examination of the patient under discussion suggested. The patient was not a text suggesting a sermon; the patient was the sermon. He insisted, as he demonstrated, that the students should confirm all the evidence he presented. His clinics were interesting because of his wide knowledge of human nature, of literature, of the history of medicine, even of veterinary medicine, and it must be admitted that these cross-references to animal pathology did make much clearer some of the problems of human pathology. Very frequently at the bedside of an interesting case he would mention similar cases reported even in ancient as well as in modern medical literature, and he quoted specific cases accurately; he did not refer to them in an indefinite manner. He often said that we must increase our experience by that of many others, since no one man's can be a sufficient guide; it must be compared with and judged in the light of that great mass of medical experience of which we have accurate record. In this connection he frequently quoted the first aphorism of Hippocrates.

DR. OSLER AND DR. HURD WITH INTERNES OF THE JOHNS HOPKINS HOSPITAL, CLASS 1898.

Left to right: Standing—Arthur W. Elting, Millard Langfeld, Walter R. Steiner, Georgiana Sands, J. H. Mason Knox, Emma E. Walker, Katherine Porter, Benjamin R. Schenck, Frank A. Lupton, Alfred B. Herrick, Mary S. Johnstone, Gertrude U. Light, Wm. W. Ford, Harry T. Marshall, Percy M. Dawson, John W. Coe, Thomas W. Hastings, Delia O'Connell, Wm. S. Baer, Joseph H. Pratt; Seated—Drs. Cox, Osler, Henry M. Hurd and Patrick J. Cassidy.

Diagnosis, in his opinion, is based fundamentally on the patient's history and physical examination, the latter assisted by whatever the clinical laboratories have to offer; the physical examination itself does not require elaborate apparatus but "the seeing eye, the hearing ear, the sensitive fingers and the understanding mind". Given these and you need very little apparatus other than your stethescope and ophthalmoscope. "Always have these in your pocket", or "Never allow yourselves to become dissociated from these", was his advice to the medical students.

Dr. Osler appreciated very highly the laboratory side of medicine. He was well trained in pathology and clinical microscopy and urged his assistants to study biochemistry in all its relations to medicine. When he visited the laboratories of his department, and he did this quite regularly, he always came as a student asking what we had to show him. But to him internal medicine was an art, an art to be aided by science but primarily an art to be acquired in the wards. He frequently warned us of the danger of too much laboratory work and urged us to "stick to the wards always"; laboratories, a secondary interest. The arts of medicine are to be acquired by long practice which is to be checked up in the laboratories. How different this is from the modern point of view that the internist is first of all an experimental physiologist and such an one can pick up the clinical side easily whenever he desires to. One could not but be convinced of the accuracy of this opinion by watching Dr. Osler at his work. He was a splendid diagnostician and yet after he had made a diagnosis remarkable for its accuracy, we would find on reviewing it that it was based on details which we could easily have perceived had we been more attentive, or on signs which we did see but did nor properly evaluate. Diagnosis to him was a personal problem so far as the patient is concerned and could not be made primarily from a collection of reports from as many different laboratories, valuable though these might be and indispensable for a complete understanding of the case.

Perhaps he was at his best as teacher in the dispensary clinic with the Junior class. He did not care to know in advance anything of the patients to be presented except that they promised to be interesting; he wished, rather, "to be in the same boat" with the students so far as these particular patients were concerned. Then he could "think out loud" as he and the students

worked out the cases together. While it is true that he must originally have had a good memory, yet we doubt that that alone is the explanation of his ability to refer years later to patients assigned us whom we had long since forgotten. The truth seems rather to have been that certain patients meant something very definite to him; that each of these added some one or more specific items to his experience. In other words, his medical knowledge was not the usual hazy memory of a multitude of observations, all fused together into a composite picture and none clearly remembered, but the accurate recollection of the exact details of those patients whose cases were worth remembering. He emphasized the importance of this accurate recollection of individual patients so strongly that perhaps more than one student had the habit of drawing on his case cards a rough picture of each patient's face in order better to remember the person whose heart, or liver, or feet were diseased.

We never caught him "bluffing", and woe to any student who should attempt to bluff him, for the class usually was treated to a hearty laugh at this student's expense. He was one of the few men who said often "I don't know" and he frequently would appeal for information or correction to those assistants and students whom he knew had recently been studying the problem under discussion, giving each one full credit for his assistance.

His manner with the patients was delightful. Their eyes followed him about the ward; they would see him but for a few minutes each, but they realized that he was their friend. The most cutting rebuke we ever heard him give a clinical clerk was on one occasion when this senior student read during ward rounds at the bedside of a young woman certain details of her history which she had given this student supposedly in confidence. In the outpatient department one sometimes saw the pathetic yet amusing sight of foreigners striving earnestly to find him and to attract his attention, often assisted by young children who could talk some English and whom they pushed about in much the same way that boys will handle a dog which they are urging to follow some scent.

Concerning his private consulting practice we should speak but briefly since we seldom came directly in touch with it. We realized that he saw but few of those who desired consultation and that excepting in the case of medical men and their families he chose

carefully those he would see. He avoided consultations concerning nervous and mental troubles because (he told us), "they took too much out of him". One day when I called late in the afternoon I found his secretary laughing about a man who had just left the room. He had come from Georgia just for a consultation, she said, but he had made no previous appointment and evidently had a condition which did not interest the doctor since twice he refused to see him. But the man insisted. Believing that in addition to his nervous trouble his feet presented a condition which might make his case more interesting (evidently his home doctor had coached him) he bared his foot and stuck it through the door of the consultation room where an examination was then in progress, saying "Look Dr. Osler, don't you see what an interesting case I am?" Dr. Osler examined him that afternoon. We found out also later, while acting superintendent of the Johns Hopkins Hospital, that it had been his rule to make no charge for any consultations in the private wards. He was entitled to such fees, but refused them saying that he desired to build up the patronage of that hospital. He did, and a rich heritage he left to those who followed. Dr. Osler devoted relatively little time to consultation work and appeared not to consider it as a major interest. We often wondered what would have happened had he had an ambition to build up a rich practice.

Dr. Osler's interest in his students and assistants was deep and genuine. In addition to the various teas, dinners and other social events to which many were invited he, for several years, met at his home each Saturday evening from eight until at least half past ten o'clock the Senior medical group and discussed their ward patients with them. In this way every member of that class came in very direct personal touch with him. The students were his first interest. When the Surgical building of the Johns Hopkins Hospital was opened elaborate exercises were planned to which many guests were invited. Since some of the meetings were to be held in the lecture room on the first floor, and this was a room of limited capacity, the question at once arose, of the crowd of guests, faculty, Baltimore physicians and medical students who would seek admission, to whom should be given preference? In Dr. Hurd's absence the arrangement of these meetings had devolved upon us. In our quandary we appealed to Dr. Osler who without a moment of hesitation said "Guests first, medical students next,

let the faculty and doctors shift for themselves". "Why, of course," he added, "this building was built for the students."

I think all of his assistants will agree that his rule was to try to find out how much he could help them rather than how much they could assist him. He outlined our work for us; he advised us, loaned us his journals and books, took us with him to medical meetings, arranged our work in that school so that we could study also in other Universities and sent us at his personal expense to distant medical meetings, even to the Pacific Coast. He did not believe that we should study too long in distant clinics. He said, "Keep your sheet anchor at home. Go abroad to study for five months but come right home and develop and teach what you learned. I'll give you six months' leave of absence out of each year for as many years as you will go." He censored our writing and obtained publishers for us. He sometimes distributed our reprints. In the case of one large report published from his clinic he had a copy of it bound beautifully and presented it to its author. Surely the most graceful compliment possible. He was exceedingly proud of any little achievement we might win. If we met with any success, his note of congratulation was the first to arrive; if we mourned a relative, his telegram of sympathy was the first to come; was a relative ill, he would inquire of his health even years later. Did we write him, we received an early reply. His motto seemed to have been, Do the kind thing and do it first.

There was very little formality in his manner. If you were near him he would take you by the arm as you walked together through the wards. If he saw you at a distant window he would wave his hand to you. He always made you feel his equal. Driving with you in an open vehicle he often would sit on the left side. In one city where it did matter he waved the assistant's protest aside, saying "Oh never mind, let the crowd think I am your country cousin." He was very democratic. On the day when, after his resignation from the Johns Hopkins University, he visited the hospital for the last time before sailing to England, while parting with the crowd of doctors and students who filled the corridors, he recognized at a little distance two scrub women at work. He at once and much to their embarrassment went out of his way to say goodby to them also.

Dr. Osler frequently advised us to make friends of children, for, said he, "That is the way to keep your own minds young."

This may possibly throw some light on the following incident: An assistant of his met on a Transatlantic liner a physician from a Western State. This physician said that the previous year he had attended the International Medical Congress. On the boat over were many physicians and, among them, Dr. Osler. These doctors congratulated themselves on their good fortune and looked forward to delightful hours discussing medical problems with him. But not once could they engage him in a sentence of serious conversation. "What did he do?" "Why, he spent every day directing the games of the children on board, organized their tournaments, acted as referee of their foot races, etc. I never saw such a man."

Mrs. Osler and he welcomed us to their home at four o'clock tea. At five o'clock the doctor would rise saying, "I have an important engagement" and would leave the house in the carriage waiting at the door. It later developed that this "important engagement" at that hour was in his corner of the reading room of the Maryland Medico-Chirurgical Library. Dr. Osler was a great reader of current medical literature. He evidently read but a few of the articles word for word and those he chose very carefully; but he perused all. He would say to the Senior class "Get the habit of reading journals; always have one in your pocket in case you have a spare five minutes. If you can't read the articles, at least read the index. That will tell you what wide-awake medical men are thinking about." He was a faithful attendant at the medical meetings and often inquired why his students and assistants did not go oftener. Even on a stormy night when but a handful were present he was there as a conscientious duty. Surely that was the only reason which brought him to some of those meetings.

Dr. Osler lost less time than any person we have known and he never allowed anyone to waste it for him. He seemed to make a careful budget of his hours and lived according to this budget. It was indeed difficult to get him to change his schedule. He was very punctual. That was a matter of conscience with him. He expected others to be just as punctual. He appeared at his clinics five minutes before the hour. This was true of all his engagements. When he was through with one appointment he was at once off to the next. At his home, while he was very easy of access, always very cordial, very interested in what we had to say

and very helpful, yet we knew at once when it was time to go. He did this in such a kindly way that I never knew of anyone resenting it. I remember a professor of Medicine from a distant school, who was not lacking in self-esteem, who called on Dr. Osler for the first time one afternoon when the doctor was very busy. We met the visitor that evening, "Yes," he said, "I found him delightful, but after a few minutes I was bowed out of the room in a most positive manner. Later I thought I ought to get angry about it but I couldn't; he was so nice about it all and I can see that he was right." Dr. Osler was very careful later to more than make up to him for the brevity of that first call.

Dr. Osler had every indication of a man with a high temper but who had schooled himself to splendid self-control. I do not remember a single remark of his which he or others would later need regret. We can speak feelingly, for on several occasions we deserved his criticism or rebuke, but received neither. "Oh, never mind" he said, "It is all right, come let's look in that book-store and see if there are any good bargains there." His self-control was well tested once at a Railroad Station in Paris. His train was about to leave and the hotel porter had not yet arrived bringing his tickets and hand baggage. He should not lose that train for that would mean missing a boat which he and Mrs. Osler, who at almost that same hour was leaving London, were to take. He walked up and down the platform alongside the train visibly disturbed and yet able to engage in a delightful and helpful conversation with his assistant. When but five minutes remained before the train was to leave he asked us to look all around the outside of the station to see if we could find the porter. The latter was found standing at the ticket gate in a very agitated condition. He ran to the train. The doctor merely said in a kindly voice, "I believe we agreed to meet on the platform," gave him a gold tip and a friendly goodby.

During his last few years in Baltimore his health was by no means good and he fatigued easily. This evidently was the result of an attack of influenza, the effects of which he felt for several years. Formerly it had been no easy matter to follow him in his ward rounds but later he visited fewer wards each day and sat by the bedside as he discussed the patients. That illness, however, was not a calamity to his Baltimore assistants, as was evident one day when, referring to a recent very flattering invita-

tion from a Scotch University, he said, "That attack of influenza took all my snap; if it had not been for that things would now be quite different, for I probably would have accepted that invitation."

After he left Baltimore his interest in all his former assistants continued. He, busy as he was, frequently put us to shame by being a much better correspondent than was at least one of his former assistants. Until the War each Christmas brought its little personal gift. His notes then were brief, usually dictated, but at the end of each were a few personal words written with his pen.

It is indeed a great privilege to have been associated with Sir William Osler, the great internist, man eminent in his scholarship but still more because of his wonderful friendship to even the humblest of those who had been associated with him. Many of his splendid gifts were undoubtedly a part of his inherited endowment, and these we can merely admire, but some of them, and these we believe were necessary to his success, were the result of careful self-training. The inspiration he aroused in all his assistants to attempt to acquire these is the splendid legacy he left to the young men who for years had lovingly called him "The Chief."

Student Reminiscences—Johns Hopkins Period

NOTE:—The following are from some of those who served as internes or worked as undergraduate or postgraduate students here during the time of Osler's service.

A Few Reminiscences of Sir William Osler's Baltimore Period

THE first time that I ever saw Sir William—then better known as "Osler"—is as clear in my mind as if it were yesterday. I had returned from a two years' stay in Europe, just in time to be present at the formal opening of the Johns Hopkins Hospital. On the morning of the opening day, I was standing at one of the windows of the administration building watching the arrival of the various celebrities who were to participate in the exercises. Presently a landau drove up and from it emerged the late Doctor Halsted, groomed, if possible, more correctly in every detail than usual. He was followed by a man whom I had never seen—a man of medium build, perfectly attired, whose most conspicuous characteristics were his sallow complexion, a very black, drooping moustache and a noticeably kind and merry eye. "Who's that?" I asked. "Osler, our new professor of medicine" came the reply. I had of course known of Osler through his early work both at McGill and at Pennsylvania, but had never seen him. I lost no time in making the acquaintance of the man whose physical appearance had attracted me so strongly, and I was not disappointed. He was different in every particular from any medical man whom I had met up to that time. His catholicity of interests made him a most delightful companion, at home in any society. Among medical men, talking shop, he shone with a brilliancy that I never saw even partially eclipsed, though he made no pretense at oratory. Among general scholars he held his own so easily and with such charming grace that one often wondered how he found the time to keep abreast of medical progress.

In the Hospital, in the Clinic, in the Dispensary he was always known as "the Chief;" and well did we to call him "Chief," for as a leader he was a chieftain of matchless qualities.

His technique of teaching, if such an expression be permissible, was altogether unlike anything with which most of us had been familiar. Never for a moment was it of the cut and dried didactic, dogmatic sort, never of such character as to encourage the dependence of the student upon the teacher; but always designed to force the student to see, learn and think for himself. Never was he too occupied or too obsessed by his own views to discuss in full any matters in connection with cases in point on which he and his pupils may have had differences of opinion, for it must be realized that for a mind as big as Osler's, differences of opinion were never taboo; in fact, they were encouraged as opportunities for profitable philosophical and technical debate.

The explanation of Osler's position in medicine as a Court of Last Appeal is undoubtedly due to his secure foundation in general pathology, and his extraordinary ability to visualize and interpret correctly the relationships between pathological conditions and the clinical symptoms manifested by the patient before him. In so far as my memory serves me, he saw the completed autopsy on practically every patient that died in his wards, as well as those on patients from the other departments of the Hospital. Not only did he witness such autopsies, but frequently took

part in them personally. He was most insistent that his staff and his students attend all post mortem examinations in order that, where differences of opinion might have arisen, all could see the exact conditions within the body, and thereby reach justifiable conclusions.

For a time after his arrival at the Hospital, he was quartered on the third floor of the administration building, though he was not often to be found in his room. When not actually in bed and asleep, he was usually to be found in the wards, the mortuary or the laboratory. At this time he had as neighbours on that floor, Halsted, (the lately deceased Professor W. S. Halsted whose loss to philosophic surgery is irreparable) Councilman (Professor W. T. Councilman, Professor of Pathology, retired, at Harvard University) and the writer. Osler was both a delight and a terror to his neighbours. A delight for reasons too obvious to need stating to anyone who knew him personally; a terror because of his passion for books—anyone's books! As no doors were locked, books, journals, magazines were constantly disappearing, only to be found in Osler's room or in the most out of the way places.

As a practical joker—well, that would take me too far afield; an entire chapter might be written on his delightfully amusing pranks to which all of us, sooner or later, fell victims. But they were never vicious, never hurtful, and always in the spirit of pure, harmless fun. I'm sure we loved him for that quality as much as for his more serious sides.

Probably nothing was more contributory to his personal influence upon the Hospital group than his delightful "at homes." In the beginning, these took the form of informal dinners at his house, on West Monmouth Street, presided over by his niece, then Miss Osler. At this period, the Hospital group was relatively small and such dinners served to bring us together, away from the shop, in a most congenial and intimate fashion. Later, as the group grew larger, and especially after the opening of the Medical School, his "Saturday Nights" (I think they were on Saturday) were instituted, and an institution they indeed soon became, for all were invited. Here, the student saw the other side of "the Chief," became acquainted with his home life, with his charming wife, almost never absent from those meetings, discovered his love for general literature and for art, experienced the charm of being guest to a perfect host, and realized that full intellectual happiness demands something more than a knowledge of only that through which one earns one's daily bread.

I believe Osler enjoyed us as much as we did him—there were no sharp lines between chiefs and subordinates in those days; our relations were those of members of a big family to one another. We all took at least one meal a day together at the Hospital. Under such circumstances it is not difficult to conceive the *esprit de corps* that permeated the place. I have never seen the like of it anywhere, nor do I expect to again, in this life.

The Hopkins Hospital was started with a clean slate, with no traditions, with a group of distinguished Department Heads—all chosen because of their manifest leadership in their several lines and their inclinations to subordinate all extraneous interests to the welfare of their immediate work. All were intent upon one object: the creation of a medical centre second to none in existence. That such object was attained none can deny and in this endeavour the influence of Osler can never be overestimated.

University of Pennsylvania *A. C. Abbott*

Random Recollections of Sir William Osler in the Early Nineties

MY recollections of "The Chief" begin in 1893, when I went to Baltimore as a Post-Graduate student, but inasmuch as I studied pathology and bacteriology and worked in the Surgical Dispensary in the mornings, I did not come into close contact with him until I went on his staff in May, 1894. I was on the Surgical Staff from June, 1893, until May, 1894, and as E and G wards were mixed Medical and Surgical wards there were times when the Chief and his attendant sprites were in the ward during surgical rounds. I recollect the queue of aspiring practitioners who used to follow after him, strung out like the tail of a kite in their travels from ward to ward. First would come the Chief, whistling or humming, often with his arm about Dr. Thayer or some other resident, then the resident staff and finally the motley crew of practitioners who formed the raw material for what the Chief once called "the dry bones of post-graduate teaching." The procession usually took the longest time to pass a given point going upstairs to E and I remember a jocular surgical patient on the porch, who had been a follower of the sport of Kings, calling out one morning in a loud voice as the procession passed him, "They're off at the Gut," "They're off at the Gut,' the Gut being, I believe, an abbreviation for the famous horse racing centre, Guttenburg.

When I went on the Medical Staff in 1894 it was technically as a medical bacteriologist, but inasmuch as the Staff was often shorthanded there was never a time when I was not doing ward work as well. It was then that I really saw the Chief at work as a clinician and came to know him better—and to love him—no matter how well this may have been concealed beneath a stolid British exterior.

The Chief was a great clinician and a great teacher. He did not make "snap diagnoses." He expected a careful history from the man who had charge of the case and it was seldom that he failed to get it. Of course, he did not get the three volume clinical novels that are in fashion at present, but he generally got the main facts. It was possible to read histories in those days without boredom or mental confusion and they were read. Then followed a careful physical examination and a note on the oustanding features by the Chief. If it was a disease in which he was especially interested it was a long and generally a very interesting note. Then usually some remarks on the disease which the patient presented, terse, pithy and pregnant with the wisdom of ripe experience. There were no impressions or diagnoses written on the history at the bedside as I remember it, though a definite opinion was usually expressed. It was prior to the days of "impressionism" and the older clinicians could decide more promptly because they did not have to wait for the results of Wassermanns or blood nitrogens or X-rays and such like. The urine and blood examinations were almost always on the chart. Fine and polished as the weekly clinical lectures were, I always felt that we learned more medicine from rounds than from anything else.

The Chief was splendid with patients. They were never cases to him; they were sick humans and he treated them as such. One of his engaging smiles or a humorous remark would put the adults at their ease. He loved the children and his favorite remark as he approached the bedside was "Well! are you feeling nice and fat to-day."

It was a pleasure to work for Dr. Osler. Most of the men worked

hard, though occasionally some kind friend passed him a "lemon" whom he took on in the kindness of his heart. I never heard him speak crossly to a house officer, though it was sometimes plain that he was annoyed by some error of omission. At times he gave us statistical work to do, analyzing groups of histories for some particular point or points. Some of the facts and figures in his "Practice of Medicine" were based on such work. The examination of the urines of the idle rich, and doubtless of the industrious plutocracy also, put many a five dollar bill in the pockets of the more impecunious house officers. These helped, even though you could get a serge suit made to order for $15.00 in the Baltimore of those days.

Dr. Osler was very active in the meetings of the Medical Societies of the Hospital. I imagine he was largely instrumental in starting the so-called "Journal Club," an organization limited to the hospital staff, at which the younger men presented summaries of literature and learned how to discuss papers. So far as I can recall Dr. Osler was the only chief that ever attended these meetings in my time. In the meetings of the regular hospital Society he was constantly presenting material or discussing material presented by others. His remarks were always brief and to the point and he never got up unless he had something of value to contribute. He was continually encouraging the members of his staff to present interesting cases from the wards or dispensary.

He was, of course, greatly interested in the historical side of medicine and took an active part in the meetings of the Historical Society. After the undergraduate Medical School was started he regularly had groups of senior students at his house and discussed medical history with them. There have probably been few medical schools where the student had the benefit of such delightful and stimulating contact with a teacher since the old preceptorial days.

After I left the Medical Staff in 1895 and went on to the Pathological Staff, I still used to see a good deal of Dr. Osler. He followed his patients to the autopsy room, particularly those whose condition had been obscure or who presented some disease that he was especially interested in. He had done many autopsies in the Montreal days and he still recognized the importance of checking up his clinical diagnoses in the dead house, not only to increase his store of knowledge but also to keep himself in a proper state of humility. He never attempted to go behind the returns, and took his medicine calmly when he had been wrong, for he realized that diagnosis is in many cases at best a matter of probabilities.

It is perhaps foolish to attempt an estimate of the character of a successful man at such close range, and yet the estimates of future generations, while perhaps more unprejudiced and dispassionate, cannot take into account certain personal factors apparent only to those who knew him. Doubtless there have been equally learned men and equally wise men who, though equally successful as practitioners, exerted but a narrow influence. After all the Chief's greatest claim to distinction lay in his capacity for influencing and stimulating other men. He did not found a "School" because for the scientific practitioner the days of schools in the old sense are past and gone. He inculcated a tradition, a tradition of thorough work, a tradition of service, a tradition of openmindedness and broadmindedness. How did he do it? It was no doubt the sum total of his qualities which counted. It was not alone his personal

charm, for there have been intensely selfish and egotistical individuals with great personal charm. It was not alone his great friendliness and evident personal interest in his students. It was mainly his philosophy of life as exemplified by his own manner of living. He had no time for petty jealousies and bickerings, he was entirely lacking in self-aggrandisement, his spirit was the spirit of unselfish service and it was his example which inspired.

George Blumer

From Dr. Osler's "First Probationer."

I HAD always wanted from a girl in my early 'teens to become a trained nurse. So, when the Johns Hopkins Hospital was opened I was quite definite in my ideas that I wanted to apply for entrance into the Training School for Nurses. The name that stood out in the Baltimore papers was that of Doctor Osler. I, knowing nothing about such matters, decided that he was the one to whom to apply. I went over, I remember, on a Monday morning, asked at the front desk for Doctor Osler and saw him. I did not then, as I have many times since, appreciate the amused expression on his face when I stated my errand.

Miss Hampton was not to enter upon her duties as Superintendent of Nurses until September. Acting in her place was Miss Parsons, a graduate of St. Thomas', London, a very wonderful woman, but a woman not possessing a very strong sense of humour. There was no mistaking *her* expression when Doctor Osler sent for her to come to his office and told her what he wanted, and added, "I want her accepted."

I went on duty on old C the following Wednesday, and as long as I was in the hospital he always called me his probationer. During my training a member of my family, a child of twelve, was a patient in C with a severe case of typhoid. Doctor Osler was at that time living in the hospital. During the most critical stage he visited the patient every morning before going to his breakfast and would then come over to the General Operating Room, where I was at that time on duty. I would feel a hand laid on my shoulder and the Chief would whisper "Everything all right; M. had a good night." I remember one day when he was in the patient's room seven times.

The day I left the hospital I met him in the corridor and stopped to say good-bye to him. He said: "I am going to write you a letter," which he did, and it proved to be a letter of recommendation which I still have and consider one of my most treasured possessions.

Tillie L. Spencer

610 N. Broadway,
Baltimore, Md.

DR. OSLER AND THE GRADUATING CLASS OF 1901, JOHNS HOPKINS MEDICAL SCHOOL, BALTIMORE

(From Dr. C. K. Winne, Jr., Albany).

Front row, left to right: S. H. Watts, L. V. Hamman, W. B. Johnston, A. M. Atherton,* G. S. Drake, Jr., D M. Lewis, F. P. Gay, H. W. Carey, J. R. Bosley,* A. J. Underhill. *Second row:* W. T. Longcope, Dr. William Osler,* R. T. Comer, C. H. Bunting, J. M. Berry.* *Double line, standing below porch, left to right:* W. H. Maddren, T. Lamson, H. L. Ulrich, E. A. Wells, L. M. Warfield, J. M. Hitzrot, J. H. Hathaway, H. P. Parker,* C. N. Spratt, M. J. Rubel, J. C. Salter, E. H. Hume, Ray Connor, N. D. Graham,* G. R. Holden, H. A. Fowler, W. D. Baldwin, J. I. Butler, F. H. Baetjer, C. K. Winne, Jr., T. R. Boggs, H. D. Bloombergh, J. M. Slemons. *On porch:* G. W. Warren, W. H. Blakeslee, G. L. Connor, R. F. Hastreiter, Adelaide Dutcher, Mabel Wells,* Carlotta M. Swett, Eleanor S. Chace, H. M. Kaufman, Mabel P. Simis, Gertrude Stein, A. L. Steinfeld, Marian B. Walker.

* Since deceased.

Dr. Osler at the third year dispensary clinic Johns Hopkins Hospital. Dr. Thos. McCrae and Dr. Jacobs in the background.

Dr. Osler quizzing a student at the Saturday morning fourth year clinic. Note tabulation of typhoid and pneumonia cases on blackboards in background. This was done every year at his direction by a fourth year committee and was an important part of our work and instruction.

From photographs taken in 1902–03 and presented by Dr. C. K. Winne.

Dr. Osler's Out-Door Clinic at the Johns Hopkins Hospital in 1902

WHATEVER might be forgotten on Saturday mornings, it is safe to say that everyone in the medical world within sight of the dome of the Johns Hopkins Hospital remembered that Dr. Osler's clinic was at 12 o'clock noon. Quite a long walk through the great corridor brings us at last to the amphitheatre—turn to the right, plunge quickly across a short open passage—thread your way through the dispensary, always full at this hour. Go on eastward and you reach a large plain room with many windows—curtains which may be drawn so as to transform each of the four corners of the room into an examining room—a rattan couch in the centre, with a couple of gray blankets on it—before the couch a table with books and papers upon it—and arranged in a semi-circle round couch and table a hundred chairs or more, filled now with men and women, Hopkins medical students—third year and fourth year, and doctors from England, Canada, and all parts of the United States, come for post-graduate work.

On the stroke of 12.00—a little stir at the door. Quietly comes in first, followed closely by his suite of residents and internes, a little dark man, with marvellous eyes. As you look at them, and especially after you have listened a few minutes, you wonder.....

"Mr. G.—What was the matter with Moses Cohen, here on November 21st last?"

Silence falls at the first sound of Dr. Osler's voice, but there is no other answer.

"Not here!"

"Mr. H.—What was the matter with John Wilson, here on January 30th, this year?"

Still no answer.

"Where *are* these gentlemen?" inquired the Chief, seizing off his eyeglasses by the gold spring and looking round without their aid.

"Where do they hide themselves?"

"Well—anybody anything to report?"

Upon this there rose up at his left hand a stout young man in gray clothes, and reported concerning a case of convulsive tic, in whom coprolalia was a prominent symptom, that there was great improvement in his patient, that her language now was only bad when she was saying her prayers.

"Yes," said the Chief, "that's the way—the very time she *shouldn't* use bad language! You can judge for yourselves how bad the language was from the fact that a medical student noticed that it was bad!"

"What is this disease called in the East?"

No reply.

"Latah! There is an article on it in the *Boston Journal of Medicine and Surgery*," adding the month and year. "Dr. So and So," addressing one of the post-graduates, "you have seen the "Maine Jumpers"—same thing, you know—same disease!"

"Well—anybody else anything to report?"

Thereupon up rose in succession three young men. The first of them reported that his patient was in a dying condition—a case of tuberculosis; the second said that his patient was better and able to be at work, but would not take his potassium iodide ("Tell him he has to," said the

doctor), and the third that he had been to three addresses and could not find his patient, who had moved. He had still one more chance to find him at a fourth address—

"Take that chance," said Dr. Osler—"that was a very interesting case, very"—looking up the record as he spoke.

"Now I give you all warning," he continued, "that you have to visit your patients that are assigned to you at this clinic and tell me what becomes of them. You must have pretty definite information, too. I want to know. I will expect you to tell me, when I come to examine you, all about your patients. So now you know what to do on Sunday afternoons."

"Well, now, what is there for to-day?"

In came a patient, in charge of a student who laid the patient down on the rattan couch, and covered him with the gray blankets. The student gave his report.

"Sit down there and look at him," said Dr. Osler. "What do you see?"

This case was evidently one of catarrhal jaundice, and the patient was advised to enter one of the wards for treatment.

A few minutes before, one of the Assistant Physicians had called out of the room a third year student, who now returned, accompanying the Assistant Physician, and a pale, meagre, slight girl of seventeen, in poor black attire—one of the submerged tenth. The group of three stood behind Dr. Osler, who was now sitting on the table, swinging his legs after the inimitable manner that Mr. George Grossmith used to exemplify as absolutely necessary in order to begin a histrionic career.

"The patient was embarrassed," said the Assistant, softly.

"What?" Dr. Osler said, turning round. "Oh, hullo!" shaking hands with the poor little girl. "How are you?" "Yes, I should think so. This is a good case to see before and after in about a month when you are nearly well again. Yes, indeed!"—All in the most kind and encouraging tone. "Well, Miss T., tell us about your patient." So Miss T. did, but Dr. Osler did not tell the little girl to lie down on the couch, only asked her a question or two in such a low tone that none of us heard the words. "A towel!" said he, and stretched it across her chest, outside her dress, to auscultate. "Where do you work?"

"Yes—a factory, of course?" "Air pretty bad?"

"Yes."

"Long hours?—How long?"

"7.00 to 7.00."

"You see," said the doctor. Then followed a masterly summary of chlorosis and its etiology and symptoms.

"A disease that should never come to the Consultant," said the doctor in conclusion. "Never." "And yet I see four or five cases every year. A doctor who cannot cure this disease should—Well—should give up! What shall we give her, Miss T.?" "Yes—Blaud's pills! Who was Blaud? Know anything about him?"

"We knew, too, Dr. So and So," turning to one of the Assistants, "but we have forgotten. Eighteenth century. Will you bring me his picture next day? It is in the library. Yes, bring me his picture, Miss T., and bring his article. You will find it (mentioning the name of the book) in the library."

"Just shows our imbecility, as physicians, that we have a remedy for

chlorosis and plenty of us won't use it. Same thing in malaria. Quinine cures malaria, and yet we have case after case coming into this hospital, having been treated with everything else. Bring her back in a month, Miss T.—Goodbye."

"Well—what next?"

Next was a negro woman, about forty-five, quiet, pale, hardworking, of a gentle disposition. Silent.

The great doctor was in an instant engrossed in his new patient and sat down at her left on the rattan couch, making the student in charge sit down on her right. Leaning over and resting his left arm on the student's right shoulder, Dr. Osler said once more—

"What do you see?"

There can be little doubt that Dr. Osler recognized Basedow's disease the moment his eyes fell on the poor woman's face, but he patiently took step by step along with the student, who, chiefly from nervousness, did not do himself justice. Yet the doctor only drew attention to the student's mistakes by a more vigorous pressure on his shoulder.

"I think you would get a great deal better in the hospital," said the Chief—"Come in, you had much better. Goodbye."

Goodbye.....Wise, kind, good.....was William Osler. The soul of punctuality, an inspired and untiring toiler, the soul of honour, a lover of learning and science and of the humanities, a man with a genius for friendship and with unsearchable riches of affection, he embodied in himself the traditions and ideals of the medical profession and of the English-speaking race. Few—very few—have done what he has done to unite that race and that profession—to heal their divisions and glorify their ways and work. He carried the torch—at which so many lighted their lesser torches—long and far.

In the great war he bore a noble part and to the great cause he gave his heart, his labours and his only son—his only child.

Sir William Osler's home, his consulting room, his hospital work, his books, his whole career, have been a blessing to the world.

The Kingdom of Modern Medicine mourns the death of its King.

Helen MacMurchy,
Chief, Child Welfare Division,
Department of Health of Canada

❧ ❧ ❧

Reminiscence

(The following incident is excerpted from a Reminiscence which it has been necessary to otherwise omit in order to avoid overlapping with other contributions.—*Editor*).

ONE morning accompanying Dr. Osler on his rounds was the venerable Dr. Robert Hall Babcock, of Chicago, an old clinician who was totally blind. The entire Medical Staff and students were standing at the bedside while Dr. Osler was demonstrating a case. Dr. Thomas McCrae carried a chair over to Dr. Babcock, asking him to be seated. The latter thanked him and said: "No, not while the Master stands."

Esther Rosencrantz, M.D.

Assistant Professor of Medicine, University of California Medical School.
Assistant Attending Physician, San Francisco Hospital.

Student Reminiscence

THE memory of Sir William Osler will always be very dear to us, because he was a personal friend to many of us. He was a teacher of us all, and he upheld real ideals in life.

I remember, very well, the first time I ever saw him. It was at the end of my first year as a medical student in Johns Hopkins. Before I left for my summer vacation, I went to Sir William's Saturday clinic to the third and fourth years. A case was brought in and one of the fourth year men asked to examine it. When the examination was completed, Sir William asked the student what his diagnosis was. His answer was that he thought it was a sarcoma of the pelvis, and he gave as his reason for making this diagnosis, that there was a large nodular mass in the pelvis. Sir William turned to his house-man, and told him something that was inaudible to the clinic. The patient was then removed into a side room and in a short time was brought back to the amphitheatre, when the student was asked to examine him again. The tumour had disappeared. Sir William then said that there was a type of nodular tumour of the pelvis that could be removed by the catheter, and explained that what the man was suffering from was hypertrophied prostate, dilatation of the bladder with multiple diverticula. One of the members of the class laughed, and Sir William turned to him and said—"It is wise that you laugh when you can, because what happened to me may come to you also sooner or later. I well remember the first time I was called in consultation after I came to Baltimore. It was to an elderly and important gentleman, who showed a pelvic tumour, very similar to the one here. I made a diagnosis of inoperable sarcoma of the pelvis, and in as gentle a way as I could, told his wife, and advised that a surgeon see the case. The surgeon came the next day and removed the tumour with a catheter."

Montreal *Lawrence J. Rhea*

Dr. Osler's Relations with the Early Days of
The Johns Hopkins' Training School for Nurses, Etc.

ASIDE from the delightful relations with Dr. Osler that I enjoyed in common with others at the Hospital, for somewhat over six months I was rather closely associated with him and saw him for a few minutes almost every day. I have some very distinct recollections connected with the writing of his text-book. One morning he asked me whether he could have the use of my (so-called) library for an hour or so every day and promised that he would not disturb any of my things. On the first day he came with one book and left it open with a book-mark on my desk. On the second day he brought two books and left them opened also on my desk; and so it went on until at the end of about two weeks the desk, the chairs and even the floor were covered with books and I did not enter again into the enjoyment of my domain until after the grand and final clearance. I was duly presented with an auto-

graphed copy of the book, which I have treasured ever since. On one page he had written "With the contrite contrition of the Author."

The criticism of the original and perhaps somewhat crude Robb's leg holder I now believe to have been justifiable, but however that may be, I do know that it gave the author a good deal of keen but not malicious satisfaction.

When I was the Secretary of the Johns Hopkins Hospital Medical Society, and Dr. Osler was the President, at that time we were a somewhat limited community and material for the meetings often ran short. In such emergencies Dr. Osler never failed me. He would spend time and trouble in stirring up the flagging energies of members or in case of need would himself step into the breach and supply the necessary paper.

Among some of the amusing incidents that occurred at this time, the following is probably well known to most of his friends. I had just finished my term as Resident in Gynaecology and was ready to enter into outside practice, when Dr. Osler suggested that we should take a house together. With this end in view we made many pilgrimages to many houses. We had about decided to take one on St. Paul Street and were looking it over with the agent, when suddenly Dr. Osler asked him, "What did the last occupant of this house die of?" I do not remember the answer, but I do remember that Dr. Osler turned up his coat collar and retreated, "not running, you understand, but moving with celerity" down the steps and into the street. The deal was never consummated, but a few days later his engagement was announced.

In his clinics at the bedside and in his talks with his students, Dr. Osler always insisted that, even with the best physician in charge, the ultimate outcome in a case of typhoid fever depended preeminently upon the nursing. Nor was his appreciation of its value confined to this disease. From the time that he came to the Hopkins until he left, and in fact all through his life, wherever he went, he always did his best to develop around him an intelligent and devoted group of nurses.

When Miss Hampton came to Baltimore, before her appointment as Superintendent of the Training School, Dr. Osler and Dr. Gilman (I believe) were deputed to meet her and show her over the Hospital. On that occasion Dr. Osler urged her to accept the position, and from the time that she took up the work he always remained her devoted friend and supporter. He did everything in his power to smooth the difficulties of her position and to lighten her task of organization. Publicly and privately in his own way he took every opportunity to emphasize to physicians and the laity the importance of the Training School and the efficiency of the Hopkins nurse. I do not know how much Osler had to do with the details of organization, but Mrs. Robb often told me in later years that she frequently went to him for advice and never failed to get the best that he could give. Whatever criticisms he made—and he was not slow to mark what was done amiss—they were always constructive and always without malice. I know that in later life Mrs. Robb thoroughly appreciated the fact that from his suggestions and help she had been able to obtain a broader view of her opportunities and responsibilities. But he did not by any means limit his help to advice. Busy as he was he was always ready to give practical assistance. Every year he gave a course of lectures to the nurses, and his address to the members of the first graduating class will always remain vividly in their memories. Nor did he forget that nurses were members of society, and the delightful dinners to which they were invited on Christmas Day and on other occasions were evidence of his appreciation of their work, and of the honour in which the profession of nursing was

held by the host and hostess at what used to be No. 1 West Franklin Street. All in all, it may safely be said that in Dr. Osler the nursing profession found a consistent supporter who did much to place it in the position it now holds in this country and in the world at large.

I hope that I may be pardoned if I close this rambling sketch with a short personal reminiscence. During the war my son Hampton went through a siege of influenza. Fortunately for him he happened to be near Oxford at the time. Sir William and Lady Osler brought him to their house and put him to bed in Revere's own room, and took care of him until he was well and strong again. Of our deep gratitude I need not speak. Both Hampton and I have always felt and will always feel that my son not only had the benefit of the skill of a great physician but also received a Father's and a Mother's care.—*Hunter Robb, M.D., 55 Bacon St., Winchester, Mass., Resident in Gynaecology, 1889 to 1901, Associate in Gynaecology, Johns Hopkins University and Hospital from 1901 to 1905.*

Osler at the Army Medical Museum

I RECALL occasional visits that Dr. Osler made to the Army Medical Museum, and the pleasant and (to me) instructive talks that I had with him.

During his connection with the Johns Hopkins University he presented two specimens to the Army Medical Museum. One is a longitudinal, vertical section of the cerebrum, showing softening of the optic radiation—from a man who had been in the Philadelphia Infirmary for Diseases of the Nervous System from November 21st, 1888, till his death January 16th, 1889. The case was published in the *Am.J.M.Sc.*, March, 1891, page 219. The other specimen is anatomical; the brain of a Chinaman, prepared in alcohol and glycerin, and dried. The record does not show whether or not Dr. Osler himself prepared the specimen.*

Dr. Osler was particularly interested in another specimen in the Museum—a cancer of the liver; the liver when fresh weighed twenty-nine and one-quarter pounds. The patient in this case was a Washington policeman, aged fifty-four. There was a history of his being hurt by a hitching post, after which he had persistent gnawing pain in the umbilical region. Seven years after the injury, in September, 1891, he was attended by Dr. E. A. Balloch, of Washington; the patient was then much emaciated, his legs swollen to his knees; he had a cough and vomiting, and soon became jaundiced. In May, 1892, he was admitted to Johns Hopkins Hospital, where he remained a month, and while there was seen by Dr. Osler, who made a diagnosis of cancer of the liver. Nearly two years afterward, February 2nd, 1894, he was admitted to the Freedman's Hospital, Washington, where he died of intercurrent erysipelas April 12th. In this case the man lived so long after the cancer was diagnosed that Dr. Osler began to doubt the accuracy of his diagnosis.

Washington, D.C. *D. S. Lamb,*
Anatomist, Army Medical Museum

(* This was no doubt one of Dr. Osler's own specimens prepared by himself in Montreal by the Giacomini method. Ed.)

Personal Reminiscences of Sir William Osler

MY first acquaintance with Dr. Osler came in the Spring of 1904, when during a visit to Johns Hopkins I was privileged to attend his clinic, accompany him in his rounds and later meet him in his home. The clinic was for medical students and the illustrative case used was one of typhoid fever. For one full hour we listened to illuminating comment, keen questioning and masterly exposition of all the essentials of the disease under consideration. I was particularly impressed with the emphasis placed on the pathology of the involved organs. In "rounds" neither methods nor material differed from those of other teaching hospitals but their unique character rather consisted of the inspiration conveyed by the Master, who, not so much by his questions, criticisms, and demonstrations as by the tones of his voice, his gestures and general bearing focussed our attention, stimulated our imaginations and illuminated our understanding.

My astonishment at my guide's presumption in inviting me, a medical student and a stranger at that, to call on Dr. Osler at his home was only equalled by my delight at the cordial heartiness and good fellowship of my host and his kindly probing of my rather shallow medical depths in the endeavour to find some common interest. He had that subtle faculty of placing his visitor in the best possible light—perhaps because he gave the impression that said visitor was the potential source of some really valuable information or evidence. It was a delicate flattery which could not be resisted. Such was Osler as a medical teacher and friend to the visiting student, who so far as any could foresee, would never pass that way again.

The next impression was from another phase of this marvellous man's field of achievement—namely as a formal speaker. It was in the following year and the occasion was the annual address of the Stillé Medical Society in which Dr. Osler charmed us all by his humour, his wonderful diction, his wide appreciation of classical literature and his fundamental idealism. After the meeting his gracious personality was lavishly expended in personal introductions to each, giving the impression of a real meeting between friends.

Once more the scene shifts and Sir William Osler in all the glory of the afternoon of his brilliant day of life, is seen at Oxford. It was in the early summer of 1914, just before the war. He was due to catch an early train, but a physician from the United States must not lose thereby the welcome of his genial hospitality. With arm on shoulder he walked to the station asking solicitously about mutual friends, urging a longer stay and finally assuring the success of visits to the laboratories of Oxford by personal messages to the Chiefs concerned. Again the vivid personal touch impressed the visitor with the essential greatness of the man. As a teacher, as a speaker, as a friend—only three sides of this many sided man, but fully adequate to preserve with affection and reverence the memory of these three pictures as long as memory endures.—*H. E. Robertson, Professor of Pathology, University of Minnesota, Head of Section of Pathologic Anatomy, Mayo Clinic and Mayo Foundation.*

OSLER AS AN INCENTIVE *

C. D. PARFITT, M.D., C.M.

Gravenhurst, Canada

ON this great occasion on which we are assembled together in memory of a Master of Medicine who has left us, I am grateful for the privilege of putting into words something of my debt to Sir William Osler. The stimulus of his magnetic personality to me must be typical of the spell he had for many others. I had the good fortune of knowing Dr. Osler as a teacher for nearly two years, and for twenty more in being honoured by his friendship, and encouraged by his kindly remembrance. I hope to show what an incentive he was to effort, how infectious was his enthusiasm, and how he inspired a love for work for its own sake.

Fortunate was the student whose clinical work began, as did mine, with the appearance of the famous textbook, which meant the relegation of all other authors to the seldom-used shelves. This book became at once a great incentive to the student. The stress upon pathology and the clinical laboratory incited to deeper interest in these, then relatively undeveloped branches. A new vocabulary opened vistas, stimulated imagination, and quickened inquiry. The terse pointed phrases, and occasional epigrams, lent themselves to memory and became for the student the Beatitudes of Medicine. Later, in conservative London, I found the textbook quoted freely by the younger group of teachers of whom the lamented Alfredo Antunes Kanthack was a brilliant example. Through him I met Dr. William Sidney Thayer, then Osler's resident physician at Johns Hopkins Hospital, and late in 1897, on Dr. Thayer's suggestion, I visited Baltimore.

The address on "Internal Medicine as a Vocation" had just been published. While treating the subject so broadly, this essay was yet so personal in application that it seemed to have been written especially for one who had just chosen that field. It was a chart for the bold, on a voyage of high adventure, Osler himself the supreme example of the master mariner.

---

* One of the addresses given at the Osler evening, Academy of Medicine, Toronto, April 4th, 1922.

To me he was a surprise, a revelation. His charm was instant and extraordinary. Combined with his remarkable intellectual qualities, his amazing culture, and his great experience, this essence of personality made him the Master, worthy of the most devoted service. This feeling the Chief inspired in all his followers.

On leaving at the end of a brief fortnight, Dr. Osler's approachableness emboldened me to ask to be allowed to work under him. I expected disappointment, but this was tempered by the kindness of the refusal, and by the silent sympathy of Mrs. Osler, who, when I called to say good-bye, invited me into his reprint room and told me to take a copy of whatever I wished. A fortnight later I was surprised and delighted by a letter in which he offered the opportunity to do research work on tuberculosis, made possible by a special fund, in part contributed by two ladies whom he had lately interested. I have since learned that he was, himself, probably, the main contributor.

Early in 1898 I returned with ardour to try to carry out his wishes. His keen mind, teeming with ideas, ever found some way to satisfy its curiosity or to develop some constructive effort. He saw a great opportunity in a field in which, in North America, there were as yet few workers. The plotting of lung blocks by Biggs in New York City had suggested the segregation and more intensive study of dispensary cases, while in pathology he wished to verify the recent work of Le Damany on pleuritic effusions. He also desired that the histories relating to serous-membrane tuberculosis should be analyzed. He suggested that shortly some lectures on pleurisy should be given, a special library collected, and a society formed, called after Laennec, to stimulate the study of tuberculosis.

The dispensary cases were assigned to me, and also a room in which to develop a laboratory. Almost at once Osler sent me to visit Trudeau for a few days in his laboratory at Saranac Lake, in order to learn something of the peculiar difficulties in my path. Soon he took me in tow to the Surgeon-General's library at Washington to look up some literature, along with McCrae, who showed me the ropes. Thus did he make the opportunity, give lavishly of encouragement and counsel, instil enthusiasm, and create incentive to work, not only for its own sake, but for his sake.

While at this work I frequently had the chance of following

Osler on his ward rounds and twice during Thomas McCrae's absences abroad, was given his place on the resident staff. Here one might

> "—Watch
> The Master work, and catch
> Hints of the proper craft."

This to me was the greater opportunity and diverted me from my research. What golden days of absorbing work and fine companionship! Most of the men on the house staff have since become distinguished. Futcher was then resident physician.

The daily advent of the Chief was the great event. An example of punctuality, he was ever before the hour, bringing the freshness of the morning with him. On his breezy entry, with quick, springing step and gay manner, our world brightened. A distinguished gentleman, he radiated a dignity enhanced by his very evasion of it. On his way to the wards, linking some companion affectionately by the arm, he cheered every one he met by his friendly word, nod, or wave of hand.

At the bedside with his group of staff and students, he made a striking picture. All faces were expectant. The patient was at once put at ease by some sympathetic enquiry, often with a humorous turn. Osler's thorough methods of investigation and teaching need no description here. His arrangement of facts usually made the diagnosis self-evident. Then came the easy, intimate talk upon the case in simple, exquisite English. There was no suggestion of *tour de force*, nor of climax, yet every word was pointed and every sentence worth remembering, often driven home by a delightful humour. Just at first the low, modulated voice was slightly hesitating and tremulous, revealing a little human nervousness even before that worshipping group. Medicine, as revealed by him, was seen to be the pinnacle of a broad, underlying structure of science and culture, to which all sources of information contributed something of value. His talks were filled with narrations of incident of personal or historical interest and with frequent references to old teachers, to the fathers of medicine of all periods, to obscure or long-forgotten men, lifting them again to momentary fame, and to contemporaries of all countries. The English classics were often quoted and the glory of the past was so illuminated that some knowledge of it became a necessity. Consequently the "Golden Sayings," the "Medi-

tations," and the "Religio Medici," were as readily found in the hospital book-store as the newest text-books. His lamp shone with equal brilliance in the ward, theatre or dispensary clinic, post-mortem room and library. Withal he was most modest.

Enthusiasm, characteristic and infectious, was carried into all his interests. It was, indeed, the dominant note of the hospital. He saw familiar things with a fresh eye and found something new at which to marvel where others saw the ordinary. This and his broad sympathy were perhaps his most striking qualities. He understood desires, dreams, difficulties, and was always accessible as a counsellor or confessor. He gave encouragement not only by words but unconsciously. While chary of giving advice he had the happy knack of simplifying the problem for one's own decision. Believing in one's rightness of intent he was always kind, tolerant and lenient to all.

In December, 1899, I carried with me as a parting gift "Graves' Clinical Medicine." Both in class and conversation Osler tried unceasingly to provoke an interest in the builders of English Medicine, and this gift bore with it its own behest. Within the year I learned from personal experience his patients' point of view—the faith he inspired, the security in his knowledge, the hope revived, the tonic of his words and with them the spur to future effort. Then throughout twenty years came the occasional, short, stimulating letters, ever interested, rejoicing or concerned as one's fortune varied, granting brief glimpses of his own joys and sorrows. When letters failed, some charming token of remembrance came, Sydenham, Wordsworth, Huxley, "Æquanimitas," always rousing to better effort. To be thus held in remembrance in his busy life, one only of very many, was wonderful.

What delight those brief notes gave! One just before leaving for Oxford is typical—"Let me know at any time if I can be of any solace to you. I hope you are getting at something in the way of literature." The last word, August 24th, 1919 from Jersey—"I hope you got my birthday greeting mailed June 26th, in the shape of an address before the Classical Association. Many copies, I fear, have gone astray. Let me know. We are enjoying a six weeks' rest here. The last few years have been a heavy strain....." P.S. "I often think of you and your rare gifts as father confessor in Ward C!"

Any attempt to tell or write of the influence of Sir William Osler, to try to recreate in words the magic stimulus which poured from him, is like trying to make sunshine and dew. His was a rare leaven, subtle, permeating all who came into contact with him; his radiant energy created opportunity, inflamed ambition, provoked endeavour, spurred to achievement; his torch, at which so many torches were lighted, with increasing brilliance lit up an ever widening circle. He will shine "Down the arches of the years" as the greatest of all physicians, a lover of mankind, especially beloved and reverenced by his pupils. who feel with Joseph H. Pratt that "We shall never see his like again."

MAKING WARD-ROUNDS WITH "DR. OSLER"

CLARIBEL CONE, M.D.

Baltimore, Md.

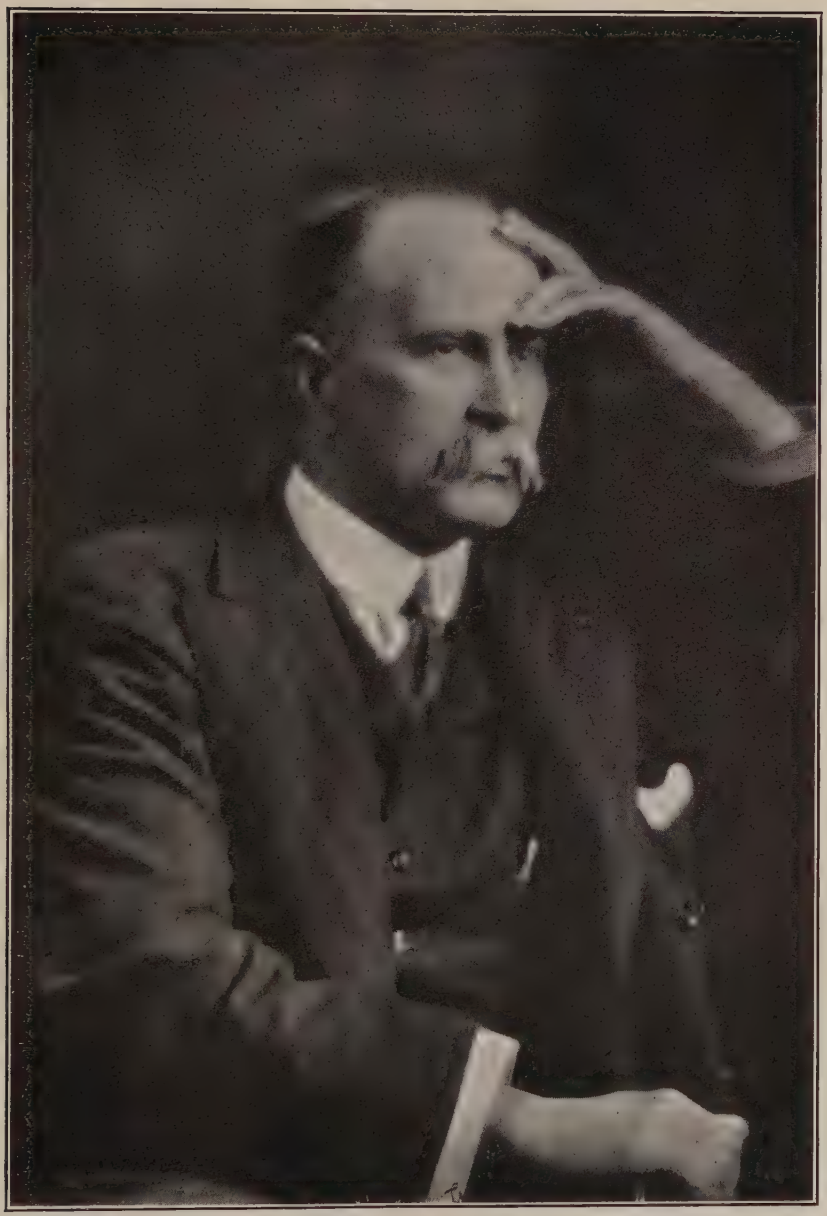
> ".....There arose within me,
> obliterating for the moment the thousand heraldries
> and twilight saints and dim emblazonings,
> a strong sense of reverence for the minds which had conceived
> and the hands which had executed such things of beauty".

IT was in the early nineties, before the Johns Hopkins Medical School had opened its doors for undergraduate work, that a small group of post-graduate students made ward-rounds with "Dr. Osler."

No one who has missed such an experience can realize what a rare opportunity for culture, enjoyment and spiritual uplift such ward-rounds were. For the Chief possessed a rare personality and all those high qualities of mind and heart that go to make the ideal physician and teacher.

More than that he was the artist, and with master-stroke he would limn for us case after case. In words rare as they were beautiful, in phrases pregnant with meaning, in manner—at times droll, again almost divine in its subtle suggestion of sympathy—he would assemble the essential facts of each case and create a masterpiece as rich in suggestion, as universal in appeal as a Giotto, a Rembrandt, or a Giorgione.

Truly the name of William Osler is written large upon the hearts of all whose privilege it was to be taught by him, and his influence for good will go on and on.



W. Osler

Dr. Osler in 1905. From a Photograph by Wm. Notman, Montreal

Sir William Osler at the Tomb of Louis—Mont Parnasse
October, 1905

OSLER AND THE ANTI-TUBERCULOSIS MOVEMENT PERSONAL REMINISCENCES

S. Adolphus Knopf, M.D.

New York

SIR WILLIAM OSLER was such a great man and such a great physician that each one who was interested in some particular specialty was prone to think of him as eminent in that especial branch. Yet Osler should not and would not wish to be remembered as a tuberculosis specialist. He was an internist pure and simple, but such a great one that he was an example for the general practitioner and the specialist alike. He was possessed of knowledge of medicine in general as few have ever been and perhaps ever will be, and at the same time knew the minutest details of etiology, pathology, prophylaxis, and therapy of pulmonary tuberculosis. He was familiar with the social aspect of the disease to a degree that made him one of the most prominent figures in the combat of tuberculosis as a disease of the masses, not only in all English speaking countries but all over the world.

The Editor of this memorial volume of the International Association of Medical Museums, who sent me the honouring invitation to contribute to it, told me that Osler's work in relation to tuberculosis would be taken up by others, and since it was my privilege to write a short biography of this great man for the "History of the National Tuberculosis Association and the Antituberculosis Movement in the United States," wherein I enumerated his writings on tuberculosis, I may be permitted here to confine myself to some personal reminiscences, although they naturally are related principally to my own especial work.

I had, of course, known of Professor Osler by his writings long before I had had any personal intercourse with him, and I knew of his touching compassion for the mental as well as the physical suffering of the consumptive. The year 1903 was an eventful one in the history of tuberculosis. Phthisiophobia was rampant in official as well as private circles. One of the Federal Departments had decided to classify pulmonary tuberculosis

with "dangerous contagious diseases". Certain California and Colorado statesmen tried to prevent tuberculous invalids from coming to their states by the enactment of prohibitive laws.* New York passed the Goodsell-Bedell bill which made the establishment of sanatoria in that state practically impossible. Although resolutions were passed by the New York Academy of Medicine and other medical bodies condemning these unjust and cruel acts, to our amazement there appeared in the *New York Medical Journal*, of August 1st, and 8th, of that year, a series of articles branding the average consumptive as "manifesting homicidal tendencies, loss of self-control and a rise of brute selfishness combining to distort the clearness of ethical perception". Similar expressions appeared later in an otherwise excellent textbook on pulmonary tuberculosis.

The indignation of the tuberculosis workers was aroused, and I decided to appear before the Society of Medical Jurisprudence with "A Plea for Justice to the Consumptive". To obtain the authoritative opinion of some of our leading men on the subject, I wrote to a number of them, the first one being Professor Osler. Promptly turning his attention to the matter in question, he wrote me the following sympathetic lines:

"I quite sympathize with you in your movement, and in reply to your questions I would say: first, I have never noticed among consumptives any greater tendency to immorality or crime than in other individuals, I should rather say the contrary. My impression is that the unfortunate victims of tuberculosis are above the average in their mental and moral character; secondly, I should say emphatically that the average consumptive is neither inclined to brute selfishness nor any special distortion of the ethical perceptions. I am glad you called my attention to the article in the *New York Medical Journal*. So far as my experience goes, such statements as are made therein are an unwarranted slander."

What better defense could the consumptive have than that offered by Osler? Phthisiophobia began to decline. May it never arise again!

It was in 1903, also, that a great need for a National Tuberculosis Association began to be felt. Certain committees and

* Private property owners objected to having tuberculosis sanatoria in their neighborhood.

societies had sprung up calling themselves American National and International Congresses for Tuberculosis. Not one of these was representative. Our foreign colleagues in Paris and London were not familiar with the situation and consented to send delegates to these congresses. In view of this situation, I had taken it upon myself to compose a letter pointing out the seriousness of the situation to the American profession at large and to the recognized authorities on tuberculosis, and suggested the formation of a National Tuberculosis Association.* This was for the purpose of letting our foreign colleagues know that the two contemplated congresses were unauthorized and not endorsed by men of standing in the American profession, either in general or in tuberculosis work. Before sending it out I submitted the manuscript of my letter to Sir William Osler, knowing that if it met with his approval I was on the right road. Here is what he wrote in reply:

Baltimore, Md., November 25th, 1903.

"Dear Knopf:—

Excellent in every way! There is not a word to alter, and I have nothing to suggest. It hits the nail fairly and squarely on the head. I feel that we should organize a national committee which should be in touch with the Congress in Paris, and it should be composed of good men from each State. That we could do during the Baltimore meeting.

Yours ever,

WM. OSLER."

The result was the formation of our National Tuberculosis Association, in 1904, our official participation in the Paris Congress in 1905, and our own Tuberculosis Congress held in Washington in 1908. Both of these congresses were epoch-making, and their successes were in no small degree due to the leadership of Osler.

Osler was an ideal teacher as well as an ideal physician, and an ideal friend to the lowly and to the great, to the poor as well as the rich. Tuberculosis as a disease of the masses and popular education in the prevention of this disease was a subject very near and dear to him. I well remember when he honoured me by an invitation to address a very large popular lay audience in Baltimore on the subject of tuberculosis. If I had any success at that memorable meeting, it was because Osler had posted me on what to say. He gave me figures and

* This letter appeared in the *Journal* of the Am. Med. Assn., Dec. 5, 1923.

facts and inspired me by his own enthusiasm for the cause. His congeniality and encouraging words helped me to overcome my stage fright. I had only met him once or twice before that evening but he made me feel as if I had known him for years, and talked to me, not as the great teacher of teachers in medicine had a right to talk to an obscure young practitioner, but as if I were his equal. He proved his friendship to me in after years on more than one occasion. When we talked together about tuberculosis, any one listening would have thought that the older of the two was not interested in anything else in medicine but consumption, consumptives, and tuberculosis sanatoria, and that the younger of the two surely must have felt as if he were the favourite pupil of the master. But he was not. All pupils of Osler who did their work well or did the best they could, were his favourite pupils and he helped them in every possible way. No matter in what specialty they branched out, he remained their teacher, friend, and counsellor. For those who were particularly interested in tuberculosis, he created the Laennec Society of Johns Hopkins Medical School for the study of this specialty.

While rejoicing in his call as Regius Professor of Medicine, his American colleagues, pupils, and friends of course felt their loss keenly. In answer to my letter to congratulate him and wish him God-speed in his new field of activity, he wrote:

> "Naturally, I am very loth to leave America where I have been so well treated and where I have so many warm friends, but it is really an act of self-preservation. I could not possibly stand for very long the high pressure of my present life. The position is almost purely academic, and I will have an abundance of time for my literary work."

Although gone, he was not forgotten by his countless American friends and pupils; nor did he forget them. I, for one, continued to call on him for guidance and counsel. In 1908 I needed his advice concerning a rather heated controversy which had arisen because of an article by Major E. Woodruff, of the U. S. Army Medical Corps, on the danger of sunlight in tuberculosis, which had had a wide and sensational publication in some medical and many more daily papers. Woodruff claimed that 100 per cent. of all white people who contracted tuberculosis in the tropics died, that sunlight was dangerous and not essential to health, and that tuberculous patients did best in regions

where there was least sunlight. I collected the opinions of some forty odd American, English, French, and German authorities on the subject, and the vast majority agreed with me in taking the opposite views to those expressed by Major Woodruff. But of all the valued replies received, I treasured none more, and none did more to counteract Woodruff's assertion than the following letter from Sir William of Oxford:

"I have had a good deal of correspondence with Woodruff about his theory, which I do not accept at all. As I told him, I do not think that tuberculous patients are better under the sunless skies of England than elsewhere, and I do not think we have any statistics to show that tuberculosis is a relatively more fatal disease in Italy than in Norway or Sweden. .....I have often employed direct sunbaths in tuberculosis and neurasthenia and with benefit."

Osler's contention was proved to be true when I was able to consult the statistics of 1903 and 1904, showing that Italy next to Belgium had the lowest mortality from tuberculosis in all European countries—117.3 per 100,000; Belgium having only 109.1 per 100,000.

Osler was genuinely loyal and kind to his friends, particularly when they were in need or in distress, as I have reason to remember with undying gratitude. He was still smarting under the ignominious slander manufactured by a sensational news-seeking press which had taken seriously a jocular remark he had made on the subject of euthanasia when, as a result of a statement I had made at a meeting of our National Tuberculosis Association, I had to suffer a similar experience. During a discussion on the use of morphine in tuberculosis, I had ventured to say that in my opinion it was an almost indispensable remedy to assuage pain in the hopelessly-ill consumptive. I remember Osler having called morphine in such cases the "G. O. M." (God's own medicine). My statements were apparently approved by all present, for it is well known that by the judicious administration of morphine we not only make the patient more comfortable but in reality prolong life. I thought the hearty applause which followed my remarks was assurance of the agreement in the opinion I had expressed. Yet, to the amazement of nearly everybody who heard me, among whom were the leading authorities on tuberculosis in this country, I was denounced the following morning in a Philadelphia paper as having openly favoured the administration of enough

morphine to hopelessly-ill tuberculous patients to end their lives. As is usual with such sensational so-called news-items, this statement quickly made the rounds of the American and European press. On learning of this calumnious attack levelled against a younger colleague, Osler's indignation knew no bounds. His own sufferings from a similar experience he had borne with that equanimity of resignation characteristic of his great soul, but when it befell somebody else it was different. He urged me to start legal proceedings against that newspaper at once, offered me his private purse to defray expenses, and assured me of the support of the American profession at large. He stood by me up to the end of a very hard but finally victorious battle, defending me publicly and comforting me in private by touching letters of sympathy and friendship which helped me to bear up under a most trying and painful experience.

Osler was devoted to his pupils, but he was also devoted to his teachers, and the veneration and enthusiasm he expressed when he spoke of his own masters and the masters of us all was an inspiration that not only stimulated interest in historic medicine but aroused gratitude for the inheritance which the teachers of past generations have left us. On October 5th., 1905, he took the American delegation, which had attended the Fifth International Tuberculosis Congress in Paris, to the cemetery of Montparnasse to deposit a wreath on the tomb of Louis, the French physician at whose feet so many American physicians of the past generation had sat. It was a touching tribute and gave the younger men a lesson in gratitude to our teachers.

Osler was always just and always eager to give credit to whom credit is due. Some years ago, realizing that no physician up to that time had been elected to the New York University Hall of Fame of celebrated Americans, I endeavoured to obtain this honour for William T. G. Morton, the discoverer of general anaesthesia. When I succeeded at last in spite of many heated controversies concerning the priority of the discovery of general anaesthesia, I know that the words of Osler, which I copied in my letters and pleas to the one hundred and two electors of the Hall of Fame, helped more than any other statements in obtaining justice at last for one of the greatest benefactors of mankind. Morton's discovery and promulgation of general anaesthesia is still the most important contribution America

has made to medical science. In defense of Morton's priority, Osler simply wrote: "William T. G. Morton was a new Prometheus who gave a gift to the world as rich as that of fire."

During the world war Osler worked for the health of our armies. The loss of his only son who had made the supreme sacrifice, was a terrible blow but he bore it bravely. In reply to my letter of condolence, after expressing his thanks with his usual warmheartedness, Sir William merely added: "It, of course, has been a pretty hard business." Then forgetful of his own sorrow, he went on to speak of our duties as physicians in the world war and urged me on in my humble efforts for the prevention of tuberculosis among our troops.

Osler was again of valued assistance to me in an endeavour to get exact information concerning the tuberculosis situation after the world war and, under date of May 26th., 1919, he wrote from England: "All goes well here and I hope we will get the problem settled ere long on national lines." Osler's helpfulness to me individually during more than twenty years of antituberculosis work, was constant and of greatest importance.

Osler's last message (Dec. 23, 1919) six days before his death, shows the greatness of the man's soul and his innermost thoughts on life's greatest problem—immortality. It reads as follows:

"*Dear friends:—The harbor is almost reached, after a splendid voyage with such companions all the way; and my boy awaiting me.*"

These last farewell words were few but they were not only full of meaning to his friends, colleagues, and co-workers but, as an expression of a firm conviction of life hereafter and coming as they do from a man of Osler's erudition, they must be a consolation to thousands. A life such as Osler's, spent in the service of his fellowmen and thus in the highest service to God, can but be immortal.

At the time of writing these reminiscences, I am myself no longer a young man. Nearly forty years have elapsed since I entered the first of the three medical schools through which I have passed. I have had many distinguished teachers and met many eminent colleagues, but I freely confess, and gladly and gratefully declare on this occasion, that none of them made a deeper impression upon my life, none have been to me a more constant inspiration, none have I been and still am more eager to emulate than my unforgettable friend, Sir William Osler.

OSLER AND MEDICAL GATHERINGS

THE ORIGIN OF INTERURBAN SOCIETIES

C. N. B. CAMAC, M.D.

New York

"No class of men needs friction so much as physicians; no class gets less. The daily round of a busy practitioner tends to develop an egotism of a most intense kind, to which there is no antidote. The few set-backs are forgotten, the mistakes are often buried, and ten years of successful work tend to make a man touchy, dogmatic, intolerant of correction, and abominably self-centered. To this mental attitude the Medical Society is the best corrective, and a man misses a good part of his education who does not get knocked about a bit by his colleagues in discussions and criticisms.".*

Medical Meetings have four main functions,

1. Legislative.
2. Social.
3. Scientific.
4. Educational.

Of Osler's influence on the first three of these I wish to speak; his influence on the fourth is so obvious, that it needs no comment.†

By Legislative is meant here, the power a body of medical men may exert over the law-making branch of Government to enact laws for the protection and maintenance of the health of the people. In his communications to medical societies, Osler fearlessly attacked politicians and legislators who, by their ignorance or neglect, failed to remedy conditions detrimental to the health of the community, notably by his studies on Hookworm, Trichiniasis, Pulmonary Tuberculosis, Malaria and Typhoid fevers and by his exposure of the dangers of the drainage system of Baltimore and the water supply of Philadelphia. The history of the conquest of Typhoid Fever could not be written without many extracts from his papers and addresses, in which he made those in high places fear to disregard his warnings.

I mention this, not as a new field of activity for the medical

* "The Functions of a State Faculty (Society)." *Maryland Med. Journal*, 1897.

† "On the Educational Value of the Medical Society." *Æquanimitas and other Addresses*, 2nd. Ed., p. 343.

man, for such work has obviously been the duty of physicians since earliest times, but to emphasize Osler's mode of attack, by which he was able to effectually deal with matters of public health, educating and winning over his opponents, but *without entering the political world and without employing political methods.* He could be among the politicians and not be one of them. His method can best be shown by a brief description of his dealing with politics in medical societies. Not many years ago some of the medical societies were so riddled by this destructive element, that they ceased to bear even a semblance of a scientific body. Distasteful to him as was this condition, he nevertheless attended the meetings and, by his contributions and discussions, raised the standard and quietly and persistently condemned the political features.

There are many individuals in this country and Great Britain who could quote first-hand his trenchant and at times epigrammatic comments, by which the conduct of a medical meeting was fundamentally influenced.*

He was never a reformer in the crusade sense, but by quiet, forceful and persistent comment, sometimes merely a gesture, the futile, selfish, and sophistical elements in a medical organization or public health body were driven to cover rather than expose further their vulnerable and petty purposes, to his witty shafts. Of venom there was never a trace, and Osler was often the only one who could effectually attack these spurious orators, without even giving offense, because, though direct and fearless, there was in his comment usually a touch of humour, which made the offender appear a little ridiculous. Where the vital interests of an organization or institution were *not* at stake, the most scathing criticism he could administer was *silence*, and I doubt if a single instance could be given of his entering into a gossipy discussion of an individual, no matter how pressed for an opinion. However lightly the shaft might appear to be thrown, the cause always justified the thrust.

The *social* advantages of medical gatherings Osler considered of great importance. In his writings he repeatedly refers to personal contact between pupil and teacher, between fellow practitioners in large and small communities, as of in-

* Some concrete instances of these I have given Dr. Harvey Cushing for the Osler Biography.

trinsic value in preventing and removing prejudice, misunderstandings, and petty jealousies, so prone to develop in teaching institutions and medical groups. The social gathering, developed in its most perfect form, may best be presented in a description of a students' evening at Osler's house in Baltimore. No scientific paper was presented, no specimens shown, but much that had been seen in the wards, out-door and other clinics was *conversationally* discussed, and then there was always that library, from which to show a rare book, with fitting applications to the subject under discussion, or to cases that had been seen at the hospital. One thinks of the Socratic school, yet the influence of Osler at these gatherings was atmospheric rather than through any systematic effort at philosophic discussion. There was nothing to suggest the mental calisthenics of the Platonic writings. The *individual* was the goal sought; and unconsciously, under the most favourable circumstances, there were being formed in the student, habits of thinking, new view-points were gained and hazy impressions clarified. The teacher, on his side, was acquiring personal knowledge of his pupil and of his needs, by which many problems of the class room and student body might be solved.

While such gatherings were not altogether original with Osler, I believe the way they were conducted was unique and, at the time they were begun, most rare in this country.

Under this subject of *social*, I venture, in an article as informal as this is, to mention what may be considered too trivial for publication. It has, however, been of such value to younger men, that should its mention lead to "doing likewise" by older men, the "too trivial" criticism will not apply. I refer to Osler's almost invariable custom of giving a luncheon or dinner to one or more of the distinguished persons present at a medical meeting. The point I wish to emphasize is that many of the other guests at these functions were young and comparatively unknown. To meet the guest of honour, whose writings he had read, and about whom he had heard and with whom he might be afforded an opportunity to talk, was a stimulation to the young clinician and research worker and possibly an event in his medical experience.

Osler's influence on the *scientific* function of medical gatherings has, in part, been already touched upon. I wish now

to refer to what seems to have been an entirely original conception with him, of how the scientific value of presentations at medical meetings, might be enormously increased.

In the summer of 1903 I was stopping with the Oslers at Caribou Lodge, Murray Bay. One day, on the golf course, as we walked between strokes, Dr. Osler said, "Don't you think the meeting of a few of you fellows at each others' laboratories and clinics, *where you could see the work in progress and hear the teaching being given would be worth while?* We could get four or five fellows from New York, another group from Boston, another from Philadelphia, another from Baltimore." Here, indeed, was the inception of an idea—but the period of gestation was nearly two years, for the birth did not take place till April 28th, 1905. At that date also, the Child was christened "*Inter-Urban Clinical Club*". It was rather a precocious youngster, for although it was not born till 7 o'clock that evening, at a dinner at the Maryland Club (Baltimore) it began to function at 12 noon that day, with an "Out-Door Clinic" by Dr. Osler.

There was a consultation of the accoucheurs that afternoon but *The Club* was not officially viable till 7 p.m.

At 2.30 p.m., the real type of demonstration for which the society was organized, was given by Dr. Erlanger, "By invitation".

"*Demonstration of Case of Stokes-Adams Disease; Experimental Demonstration of Heart-Block*".

Until I looked up this first programme (a copy of which I have) I had not realized that this demonstration had been given at the first meeting (1905) so vivid to-day is the picture of the exposed heart being made to beat, by the manipulation of the operator, at the different rhythms, till complete block was produced. Here was an example of the value of the visual method of presentation at medical meetings. To understand the technique and significance of this intricate mechanism of heart-block would have required much attentive reading but here it was immediately grasped; moreover the experimenter could be questioned directly and the "Clamp" (devised by Erlanger) examined and its application explained. Had it been necessary to advance arguments in favour of such a society of physicians

to visit the "workshop" of clinicians and researchers this demonstration alone would have been sufficient to silence any opposition.

What Osler realized was, that work of this kind was being done at many of our medical institutions and that the workers were known to a few only and that their efforts were reaching others through the comparatively unsatisfactory and slow channel of literature. On the second day of the meeting, April 29th, methods of delivering amphitheatre clinics were demonstrated, the student presenting and discussing the case—then a new system, since widely imitated. Those of us who were laboratory workers had an opportunity to spend an hour seeing methods of clinical laboratory investigation. Then there was the ward visit, the student again, as Clinical Clerk, presenting the case, after which The Chief dealt with the broader medical aspects, the student taking part in the discussion.

Thus twenty-five or thirty physicians from different cities returned to their work of instruction with first-hand knowledge of the newer methods of teaching and of up-to-date technique in clinical, experimental and research work.

The society, the first of its kind, has been duplicated in the West, in The Cosmopolitan Club, and by the surgeon in the East.

It may not be amiss to call attention to what Osler would criticise in the present day "interurban" programmes as compared with this first one, which though simple, was full of suggestion, stimulation and instruction. I refer to the omission from the programme of teaching demonstrations and instead a too great abundance of technical *papers*, often read without any demonstration or at most intricate and complicated charts and apparatus which would require hours of personal application on the part of the visitor to grasp.

I feel sure this type of demonstration was not in the mind of the founder, and certainly such demonstrations have not added to the value of the meetings.

"If he (the physician) cannot go abroad, let him spend part of his short vacation in seeing how it fares with brethren in his own country.

"The all important matter is to get breadth of view, as early as possible, and this is difficult without travel." *

* From "Internal Medicine as a Vocation." *Æquanimitas and Other Addresses*, by William Osler, 2nd. Ed., p. 137. *Med. News* (N.Y.), 1897.

WILLIAM OSLER AND THE INTERURBAN CLINICAL CLUB

David Riesman, M.D.

Philadelphia

ONE of the outstanding characteristics that endeared Osler to medical men, even to men who did not come in direct contact with him, was his habit of giving encouragement to those whose work impressed him favourably. If he saw a worthy publication, whether the man was known to him or not—and he seemed cognizant of nearly everything published in the domain of internal medicine—he would send a word of congratulation or compliment. It might be a brief letter or only a postal card with the words "That was a good paper of yours on————. W. O.", yet to the struggling young doctor it meant more than the praises of all other friends combined. By keeping watch over what the younger men in medicine were doing, he knew personally or by name better than anyone else the active workers in the generation just below him.

This knowledge and his great desire to advance medicine in America prompted him in 1905 to take a step that had a far reaching influence upon clinical medicine and medical education in this country. On April 28, 1905, he called together a group of men, six from each of the four large cities of the east—Boston, New York, Philadelphia and Baltimore—to form an Interurban Clinical Club after the pattern of a Surgical Club organized in July, 1903. The initial meeting was called to coincide with Osler's final days in Baltimore. No one privileged to be present will ever forget the great teacher's last clinic—the amphitheatre crowded with students and physicians; the members of the newly formed club on the front benches, and in the pit the patient with Osler on one side and a perspiring student on the other. The case was that of a young colored girl who had had lobar pneumonia some time before, but who had not yet fully recovered. Tuberculosis had been suspected, but numerous sputum examinations had been negative. Osler asked the student whether he had any suggestions or ideas about the case. In great earnestness, with a contracted brow, the embarrassed student

bent over and scrutinized the patient long and profoundly, but saw no light. Finally Osler, patient and sympathetic, said to him, "Will you please walk round?" The student rose and passed to the other side of the patient and then in the neck beheld a mass of cheesy glands. The incident was a valuable lesson. It illustrated a point often dwelt upon by Osler in his writings, namely, that most of our mistakes in diagnosis arise from errors of omission rather than from those of commission. In my own teaching I have tried to enforce this lesson by telling the students "to walk around."

The whole clinic was an inspiration, and left an indelible impression upon all, especially upon those who like myself had never had the privilege of sitting as disciples at Osler's feet. All present were under the influence of a deep emotion of regret, regret that the great master had seen fit to give up forever the unique place he had so long held in the medical and cultural life of America.

In the evening of this memorable day the group of men called together by Osler met at dinner in the Maryland Club, and with Osler as temporary chairman organized the Interurban Clinical Club by electing Richard Cabot president, and Thomas McCrae, secretary. Dr. Osler was elected the first honorary member.

The charter members of the Club, all but one of whom were present at the inaugural meeting, were Cabot, Joslin, Locke, Lord, Pratt and Tileston of Boston; Camac, Conner, James, Janeway, Lambert and Meara of New York; Edsall, Kelly, Longcope, Riesman, Sailer and Stengel of Philadelphia; Barker, Cole, Emerson, Futcher, McCrae and Thayer of Baltimore.

From that time on until the present, except during the War, the Interurban Club has held two meetings a year, one in the spring and one in the autumn. At first the meetings were held only in the four constituent cities, but later other meeting places were occasionally selected. Thus the Club has met at New Haven, where some of the members have come to live, and once, in November, 1913, it met jointly with a similar organization in Chicago, spending a day on the return trip in Cleveland. In 1916 a meeting was held in Rochester, Minnesota, the Club being the guest of the Mayo Clinic. At the meeting in Boston in December, 1914, Drs. Capps, Miller and Wood-

yatt of Chicago and Hoover of Cleveland were present as guests, returning the visit the Club had paid to Chicago and Cleveland.

As long as Osler lived the Club regularly sent him a few words of greeting by cable at each semi-annual meeting.

The Interurban Club started with a membership of twenty-four and a limit of thirty. Vacancies arose through a provision in the by-laws to the effect that upon attaining the age of fifty a member should be automatically put upon the honorary list in order to make room for a younger man. Not long ago, owing to the fact that so many were being transferred to the honorary list, the Club voted to extend the age of active membership to fifty-five, but even that no longer retains many of the original members, as the majority have reached and passed that age, for the Club is now nineteen years old.

Vacancies have unfortunately also been created by death, which has deprived the Club of three outstanding men, active teachers and able clinicians: J. Dutton Steele, A. O. J. Kelly and Theodore C. Janeway.

In addition to Osler the Club elected as honorary members: E. C. Janeway of New York, R. H. Fitz of Boston and S. Weir Mitchell of Philadelphia. All of these together with the first honorary member have passed away.

It is not an easy task to evaluate the influence of the Interurban Clinical Club upon medicine in this country. Perhaps a member of the Club is led to overestimate this influence. There are, however, certain facts that may serve as a basis of impartial judgment. Inasmuch as all the members were teachers of clinical medicine, the Club made interchange of methods of teaching its chief aim and purpose. For years this purpose was kept prominently in view. At each semi-annual meeting the men in the host city provided a programme illustrating methods of teaching and containing also reports of the results of scientific research. At the regular dinner on the first meeting day, always a Friday, the lessons learned at the morning and afternoon sessions were discussed. In addition some set topic germane to the field of medical education or of clinical medicine was taken up for general discussion. From the meetings and the discussions members would return to their respective homes to put into practice in teaching and in investigation whatever of value they had learned; and it may be truthfully said that no one ever

went away from a meeting of the Club without having learned something of value. To illustrate: The method of teaching by clinico-pathological conferences, originating in Boston, spread through the membership of the Club to other medical schools. Ideas of social service and methods of putting them into practice were largely disseminated through the membership of the Club after witnessing the brilliant results achieved in Boston and in Baltimore.

I have said above that the city that acted as host provided the programme of the meetings. This is not intended to convey the idea that the members of the Club in the host city were the sole performers. Very early the custom arose of having non-members take part in the programme. It was particularly to the young men that the Club gave the opportunity of reporting what they were doing in the line of original work in teaching and research. It soon came to be looked upon as a not inconsiderable honour to appear before the Interurban Club, and that this acted as a stimulus to the younger men needs no emphasis.

The Club played an invisible but real part in the Great War. At its meeting in Boston in April, 1917, the Club adopted the following resolution: "The Interurban Clinical Club expresses to the National Defense Council its earnest desire that national prohibition be instituted for the duration of the war because of the effect upon public health and for its economic effect." After having been signed by all the members present this resolution was forwarded to Dr. Franklin Martin, who in a prompt letter of thanks acknowledged its receipt. At the same meeting the Club adopted another resolution dealing with the question of venereal diseases. This resolution reads as follows: "That steps be taken to instruct officers in the early diagnosis of syphilis by modern laboratory methods and the importance of early diagnosis and treatment.

"That a standard method of the treatment of syphilis be established, and made obligatory, and that suitable facilities and suitably trained persons be provided in connection with all large bodies of troops to carry out these measures.

"And be it further recommended that a board be appointed to institute measures for strict exclusion of prostitutes from the vicinity of camps and for the prevention of venereal disease."

A third resolution adopted read as follows: "In consideration of the inefficiency of many states and local boards of health or health officers in the many regions from which troops will come and to which they will return invalided or on furlough, we recommend a supervision of and cooperation with these local authorities by the United States Public Health Service. We recommend, also, that this supervision be extended to include our industries." Copies of this resolution, signed by all the members present, were forwarded to Dr. Franklin Martin, Chairman of the Council of National Defense, and to Dr. Rupert Blue, Surgeon General, United States Public Health Service, Washington.

When Theodore Janeway became a dominant force in the Medical Division of the Surgeon General's office, he at once turned to the men he knew best to help him in his tremendous task. Longcope and Conner, both Interurban members, became associated with him in the Service and in turn succeeded to the place made vacant by Janeway's lamentable death. At the same time many other members of the Club received important assignments due to the fact that their capabilities and personalities had become known through their membership in the Club to the men at the head of medical affairs in Washington.

But the finest and best result of the Club and the one for which the members will forever hold the founder in grateful memory, is the friendships that have been fostered among the members in the years that have passed since Osler called them together. Although I have not personally canvassed my fellow members upon this subject, I feel I am not overstating the facts when I say that nothing in our medical life has been so delightful, so preeminently satisfactory as the close associations formed through the Club. They have grown stronger and stronger with the passing years, and will continue till the end of life.

The Interurban Clinical Club has served as a model for similar organizations in other parts of the country. Wherever formed these clubs have been of great benefit to the members themselves and to clinical medicine and medical teaching. In the East an interurban clinical club has been organized by a younger generation of men, and this Club is already contending for the laurels so long worn by the older association.

To those who are members of the Interurban Clinical Club, particularly to those who have been in it since its beginning,

Osler's connection with it will not appear unworthy of record in a volume given to the portrayal of the great clinician's many-sided life.

DR. OSLER AND THE MEDICAL PROFESSION OF MARYLAND*

HARRY FRIEDENWALD, M.D.

Baltimore, Maryland

THE tidings of the death of Dr. Osler in his far-off home brought sudden and profound sorrow to this community. Never has the medical profession of this city felt the loss of one of its members more keenly, never has the whole community shown greater respect and honour and love for the dead. Everyone spoke of Dr. Osler's death as of a personal sorrow. All felt that we in this community had lost one who was ours, through whose splendid and distinguished services we had benefited, in whose greatness, in whose honours, and achievements we took just pride, for he belonged to us.

And yet he came into our community a man of forty, lived and laboured here but fifteen or sixteen years, and left us twenty years ago to continue his work in a distant University.

How is it that his being here for only a very short time, his almost comet-like presence among us, should have impressed and influenced us so profoundly? It is not simply because he was a teacher of medicine of rare ability, the medical head of a large hospital, the great consultant. For this the community would have admired, respected, honoured him, been proud of him. These facts were not alone the reason for the universal devotion of the medical profession. Greatness as a teacher, as a medical writer, as an author in some of the by-paths of medical literature, these will be the laurels which the world of Science and the world at large will offer to his memory. But we here think of Dr. Osler with other feelings added to these of admiration and respect and honour for the great man who won the

*Extracted by permission from the *Osler Memorial Bulletin of the Medical and Chirurgical Faculty of Maryland*, 1920, XII, 60-62.

highest distinctions for himself and for his profession. We felt near to him, each one of us, we loved him as we have loved none other. Each one of us saw in him the friendly guide and master. This was the inspiration that made us strive with greater effort toward higher ideals. He showed a personal interest in each one of us, his counsel and encouragement spurred us on. But even this does not account for the deep affection and love in which he was held by all.

The explanation lies in that peculiar charm of character which was his alone. Never have I known a man who combined as he did, greatness with unassuming simplicity and modesty, the wisdom of age with the light heartedness and enthusiasm of youth, earnest seriousness with buoyant jollity.

It was this charm of character which captivated the heart of all who came in touch with him as pupils, as colleagues, as fellow-practitioners, as patients, as well as those with whom his relations were purely social.

I cherish it as one of the greatest privileges of my life that I knew Dr. Osler and enjoyed his friendship. It was in the committee that published Dr. Cordell's *Medical Annals*, in the Medical and Chirurgical Faculty and its Library and especially in the Book and Journal Club that I was permitted to enjoy this association. It was a privilege to witness the force with which he put new life, a new outlook, new energy and spirit into all of the activities of the Medical and Chirurgical Faculty so that since that time it ranks among the foremost of the State Medical Organizations in this country. It was the living spirit of Dr. Osler which has watched over this Faculty and its Library until his death. For have we not in all truth, felt his living presence among us during all the years that he has been away, so that even the younger members who did not know him, felt his active influence and nearness. So long as this spirit of Osler lives on in the Faculty as a whole, and in its individual members, this venerable organization and the medical profession of Maryland will continue in their progress toward those ideals to which he was devoted. We shall miss Dr. Osler sorely, his messages of cheer, his encouragement and interest, his fascinating and scholarly addresses, his classical medical writings. But the influence of his life and character, of his work and name will ever be with us and will outlive many generations.

There is an ancient Hebrew legend which, like many legends, contains a great truth. The legend tells us that the world continues to exist because of the piety and virtue of thirty-six saints. But for them the world would long ago have been destroyed. Each generation has its saints, but they are hidden from view by their modesty, their humility and their simple lives. They themselves would be the last to admit this virtue. Still it is because of these few and not because of the many that the world goes on. The legend may well be applied to our profession. It is because of the character and spirit of a man of the Osler type that a whole generation is supported and enabled to advance and to elevate the high calling of the practise of medicine.

OSLER'S INFLUENCE ON MEDICAL LIBRARIES IN AMERICA*

JOHN RUHRÄH, M.D.

Baltimore, Md.

IF the name of Osler had been left out of the title of this paper, those at all familiar with the American medical libraries would have been able at once to fill the omission. There is none other who has had such an universal influence. Scores there are and have been who have left an imprint on one medical library, and there are some whose influence has extended to two or three, but Sir William Osler is the only one whose magic has touched all.

Wherever he happened to be his interest in the medical library was paramount. For example, whenever he visited the Massachusetts General Hospital we are told that no matter how pressing his other duties, he invariably found time to run into the Treadwell Library for a few moments, and he followed up his visits with letters and suggestions to the librarian. This he did for all the librares he encountered in his travels.

There is an active, wide-awake Library at Wilkes-Barre, Pennsylvania; his interest in it has been continuous and most beneficial. At the occasion of his last visit there the library had

* Extracted by permission from the article in the *Annals of Medical History*, P. B. Hoeber, 1919, ii, 170-183.

been started in a small way. His personal remarks, and letters to members interested, have stimulated and sustained them in their zeal for a real collection of books. Here, again, his interest has manifested itself in more material ways, and these gifts of his mean much, for they help others to give.

The young Osler received his medical education at McGill University, in Montreal, and when his student days were over continued his residence there, eventually becoming a member of the faculty. Thus it was that the library of the Medical Department of McGill University was his first love, due to the subtle charm of youth and propinquity, and in spite of many favours in the past it has become the recipient of more. Here as elsewhere he gave many rare and valuable copies of the old masters of medicine. It is related that a friend once saw him emerging from an Edinburgh bookshop. In his arms he clasped a large volume and his face wore that peculiar expression of mingled pride of possession and happiness common to collectors who are rejoicing in *une trouvaille*. This "find" was the first edition of Andreas Vesalius, printed by Oporinus in 1543, and bearing the colophon, familiar to book lovers, of a semi-nude man, astride a swimming dolphin. The man is crowned with a wreath and is playing a harp in most animated fashion. This volume is illustrated with wood-cuts of such quality that in their day they were ascribed to Titian. It went to McGill, but later, when he replaced it by another, was sent to the Library of the New York Academy of Medicine.

His experience with the Boston Medical Library began early, as he says:

"In the first place I have a feeling of lively gratitude towards this library. In 1876 as a youngster interested in certain clinical subjects to which I could find no reference in our library at McGill, I came to Boston, and here I found what I wanted, and I found, moreover, a cordial welcome and many friends. It was a small matter I had in hand but I wished to make it as complete as possible, and I have always felt that this library helped me to a good start."

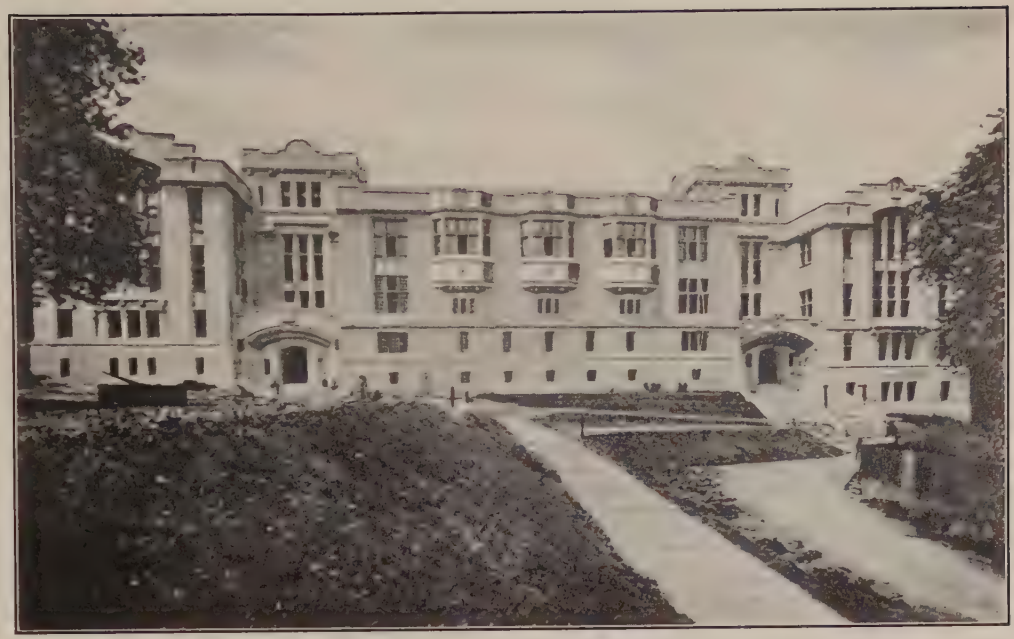
From this time on he was a constant and helpful friend.

Miss Marcia C. Noyes has written a sympathetic account of his influence on the Library of the Medical and Chirurgical Faculty of Maryland and on the Society itself. The Library,

when Osler found it, was a collection of a few thousand medical books, mostly old, and some journals. When he left us, in 1905, there were 14,590 volumes, and it has grown rapidly ever since. Through his influence it acquired its own building, and after he left in 1909 it was moved once more, to the comfortable, especially built library at 1211 Cathedral Street. This new building was directly due to the cast mantle of the "Chief." In it the large meeting room is known as Osler Hall. There is also an Osler endowment fund and, perhaps of more importance, an Osler fund for the purchase of books relating to medicine. Another thought of his in his Baltimore period was the Book and Journal Club, an excellent idea for an impecunious library. With the small dues of five dollars a year a group of over one hundred men were induced to join this club, the meetings of which, under Dr. Osler, were a delight to all book lovers. Most of the money went to the use of the Library, but a portion of it, aided very generously from Osler's own purse, went to two or three meetings a year at which many of the best medical minds of the country contributed to the intellectual side; and Dr. Osler's human instincts saw to it that the inner man was not forgot.

The Library at the Johns Hopkins Hospital was started at about the same time as the Hospital (1887), and room was made for it in the administration building. This little Library had wise heads to start it, but no one took a greater part than Osler. He donated much and sought out material for it when abroad, and all accessions were gone over from week to week. He not only used the Library himself but made his students use it, giving them references to journal articles or monographs and teaching them to go to original sources for their information. He also insisted on consulting the world's literature, not only American or English writings, but French and German as well and even in other languages where the student's linguistic ability permitted. He was instrumental in getting various gifts, notably the Marburg collection, a set of older books on medicine.

In Toronto the Library was a matter of keen interest to him from the formation of the Ontario Medical Library Association in 1887. He gave a large number of books, including some old rare items and certain incunabula, and also established a fund in honour of his old teacher, Dr. James Bovell, to whom in part his text book on medicine is inscribed. The interest of this fund is



THE NEW MEDICAL BUILDING, MCGILL UNIVERSITY

The Medical Library occupies the front of the upper story of this building.
The Osler Library occupies the same floor in the rear.

THE NEW LIBRARY BUILDING OF THE MEDICAL AND CHIRURGICAL FACULTY OF MARYLAND AT BALTIMORE.
The Osler Hall is contained in this building.

to purchase books on medicine, physiology or pathology. The older library has been merged with that of the Academy of Medicine and to this Osler has made a number of other gifts of money.

The great Library of the Surgeon General's Office, in Washington, naturally found a warm place in Osler's heart. As a reader and borrower of books he appreciated what a treasure house it was. Let him tell in his own words how he began to use the Library:

"In 1881 I paid my first visit to the great Library of the Surgeon General's Office, Washington, to look up the literature of echinococcus disease in America, a subject in which I had become interested. At that date the Library had not yet moved from the old Pension office, and the books had far outgrown the capacity of the building. It was my first introduction to Dr. John S. Billings, to whose energy and perseverance the profession of the United States is indebted for one of the greatest collections of medical works in the world. This was the beginning, too, of a warm friendship with Dr. Robert Fletcher. Probably few men in the profession owe a deeper debt of gratitude to the Surgeon-General's Library than I. Not only did I enjoy the friendships of the officials of all grades, but from the Library itself, and from its two great publications—the *Index Catalogue* and *Index Medicus*—I have had constant help in my literary work."

For the book lover, the bibliophile, he has had the affection of a brother. There certainly were but few of any prominence that were not his warm friends, and he did much to induce them to make a practical use of their predilection and knowledge.

An example, to cite but one, was the case of the scholarly Cordell, for years an amateur in the history of medicine, particularly that of Maryland. Under the genial patronage of Osler this talented worker gathered his forces and his notes and brought out the *Medical Annals of Maryland*, one of the best pieces of medico-historical work produced in this country.

In this connection, it is interesting to note that Osler, while a book lover, a bibliomaniac, if you will, was singularly well poised in that he not only knew the value of books and libraries, but their place as well. For the man so intoxicated with learning that his powers of action were paralyzed he had the greatest sympathy. On the other hand, no one has had a livelier appreciа-

tion of the dangers of ignorance. No one in our time has done more to lead the doctor to the library.

What, then, has been Osler's influence on the American medical libraries? This question is, in a measure, answered above and chiefly in his own words. He had a keen appreciation of the value of medical books, as summed up in that wonderful epigram: "To study the phenomena of disease without books is to sail an uncharted sea, while to study books without patients is not to go to sea at all." In addition to this, he has appreciated medical libraries at their full value, not only for himself, but for others. This he taught to his students and to the profession. He knew and emphasized the use of the recent journals and monographs, the necessity for knowing the latest and best, and pleaded, and not in vain, for the historical method of approach, and pointed out the impossibility of clear vision without it. Then, too, he did much to encourage the study of the lives of the masters; a major part of recent biographical sketches of medical worthies is due directly or indirectly to his influence. He taught us not only to study the great teachers of other days, but to accord them reverence and their due meed of honour. To drag the treasures of the bookshelves into the open and make them mean something is another lesson he has taught. This lesson has fallen largely on barren ground, although there is hope in the future.

He has taught the art of giving practically; he not only gave himself, but led others to do likewise, not as a necessity but as a privilege. Witness the Frick, the Marburg, the Casey Wood contributions, to mention only three.

He knew that a library must be financed, and here again he gave, led others to give and used such delightful methods of raising money as the Book and Journal Club. He did much to do away with the old-fashioned librarian and encouraged the helpful, cheerful variety. He made the librarians feel that their work was of great importance and did much to develop the *esprit de corps* which the Medical Library Association has gone on fostering.

His chief influence, however, is that he has imparted something of his spiritual quality to those about him and to those with whom he came in occasional contact. This intangible something, which defies description or analysis, he possessed in generous measure; this Oslerian spirit will long pervade all the libraries with which he has been personally associated.

Ever yours
Wm Osler

FOREWORD

SIR WILLIAM OSLER IN GREAT BRITAIN

SIR HUMPHRY ROLLESTON, BART.
K.C.B., M.D., D.C.L., D.Sc.

Regius Professor of Physic in the University of Cambridge
Physician-in-Ordinary to H.M. the King

Cambridge, England

THE memory of Sir William Osler in the hearts of his friends and admirers in Great Britain,—and no medical man had so many,—has not become less vivid with the passing years since 1919, when they lost one to whom they could confidently turn in any grave emergency. His associations with Great Britain may be briefly outlined in relation to three periods or phases of his life; the first, of fifteen months in 1872-73, just after his graduation at McGill, was spent at University College working in the physiological laboratory under the late Professor J. Burdon-Sanderson, and in the adjacent hospital and elsewhere at clinical medicine. Some of the fruits of this post-graduate study appeared in two papers on the blood in the *Quarterly Journal of Microscopical Science* (1873) and in the *Proceedings of the Royal Society* (1874).

During the second period, terminating in 1905, when he became Regius Professor of Medicine at Oxford, he made frequent visits in the summer months for rest and oppor-

tunities for literary labours in peaceful surroundings, though on several occasions there was in addition a special purpose, such as the delivery of the Goulstonian Lectures at the Royal College of Physicians of London in 1885 on endocarditis, and the Cavendish Lecture at the West London Medico-Chirurgical Society in 1899 on the etiology and diagnosis of cerebrospinal fever. When on these visits he would attend in his stride, so to speak, meetings of the British Medical Association. It was during this period that I was fortunate enough to meet him, being introduced to him at the Royal College of Physicians about 1896 and later staying in the same house, that of the late Dr. William Sykes, the Honorary Secretary of the Medical Section, whom he characteristically spoke of as "Bill Sikes", for the Portsmouth meeting of the British Medical Association in 1899. Here he took part in the discussion on the preventive and remedial treatment of tuberculosis opened by his future "brother Reggie of Cambridge", Sir Clifford Allbutt, and read a paper on haemochromatosis, a subject then almost unknown. When he occasionally came round the wards at St. George's Hospital, where he was afterwards Thomas Young Lecturer on Clinical Medicine, it was a pleasantly inspiring experience to watch his careful method of clinical observation and how rapidly he got on friendly terms with everyone; for example, in a case of von Recklinghausen's neurofibromatosis he pointed out thinning of the skin over the multiple tumours, and took a keen interest in noting pulsation of the dorsal veins of the dependent hands in a man with myeloid leukaemia. I remember when at supper on 24th July, 1904, on his return from a visit to the late Sir John Burdon-Sanderson, who had resigned the Regius Professorship at Oxford, and a few days before sailing for America, his humorous query, "Do you think that I am sufficiently senile to be a Regius Professor?" This gave me the erroneous impression that he had no such intention, and I was much surprised and cor-

respondingly delighted when on 17th August the appointment was made public.

On his arrival at Oxford in the spring of 1905, the first house the new Regius Professor took was Number 7 Norham Gardens which, curiously enough, had years before belonged to my father's friend, Goldwin Smith, the Regius Professor of Modern History (1858-1868), who left Oxford as long ago as 1868 to become the first Professor of English and Constitutional History at the then new University of Cornell, and in 1871 moved to Toronto, where in 1910 he died full of years and honours. As Prof W. Max Müller also lived in the Oxford house, it has had a famous record. Among the earliest, in June, 1905, of the crowds of his friends whom I met at Osler's "Open Arms" was Professor Wm. H. Welch, who was over in connection with J. S. Sargent's picture in the Royal Academy (1906) of what may be called "the big four" of Johns Hopkins, Professors Osler, W. S. Halsted, W. H. Welch, and Howard Kelly; this fine painting* appropriately marked the first break in the memorable combination which in less than twenty-five years had raised the new Medical School of the Johns Hopkins University to the premier position in America.

This short and personal contribution to an international subject is advisedly headed "*Sir William Osler in Great Britain*" rather than in Oxford or England, for Oxford was but the centre from which he and his activities radiated far beyond the geographical boundaries of England. Soon becoming the real though unobtrusive motive power in British medicine, he quietly gathered round him some younger men to start the Association of Physicians of Great Britain and Ireland, which held its first meeting in 1907; *The Quarterly Journal of Medicine*, which began in the same year, was most intimately linked with the Association, for the members of the Editorial Board were, with the exception of Sir Wilmot Herringham, who

* This famous portrait is reproduced in this volume, opposite page 260.

became the Honorary Secretary of the Association, the same as those who had been inspired to launch the Association, and Osler was of course its father. It was characteristic of him that, though the originator of the Association, he did not take the chair at the initial meeting of what to all intents and purposes was a replica of the Association of American Physicians of which he had been President in 1895. His personal influence was electric, widespread, and immediate; it was natural for him to encourage young men by word of mouth or by a friendly line conveying congratulations on a published paper, and it was his delight to collect men to meet and know medical visitors from America or the Continent at pleasant dinners at the Athenaeum. As President of the Section of Medicine of the International Congress of Medicine in London (1913) he set a fine example of genial and splendid hospitality. In constant demand, he was necessarily much in London, often for several days in consecutive weeks, and took an active part at the Royal Society of Medicine, where he was President of the Clinical Section and first President of the Section of the History of Medicine.

Overworked and grievously stricken by the loss of his only son Revere during the war, he never gave in, though the change was plain to his friends; in 1919, the last year of his busy life, when he had the address, "The Old Humanities and the New Science", for the Classical Association hanging over him, he undertook the Presidency of the Fellowship of Medicine and Post-Graduate Association, which was struggling with the extremely difficult task of establishing an efficient post-graduate scheme in London. In the campaigns against tuberculosis and especially against venereal disease he was an energetic and eloquent leader, and indeed it is difficult to think of any avenue in medical progress in which he was not among the pioneers. In his charming memoir of William Pepper he quoted from Matthew Arnold's "Rugby

Chapel" and it is difficult not to apply to him the lines:

> "O strong soul by what shore
> Tarriest thou now? For that force,
> Surely, has not been left vain!
> Somewhere, surely, afar,
> In the sounding labour-house vast
> Of being, is practised that strength
> Zealous, beneficent, firm!"

Essentially a humanist, Sir William linked up medicine with other branches of learning, and his sympathetic and broad-minded culture was recognized by his election as President of the Bibliographical Society for the unprecedented period of seven years, and of the Classical Association in 1918, the latter being the first occasion on which a medical man had been chosen for this high honour and thus a tribute to one of the most notable facets of his personality—that of the Scholar-Physician. His early devotion to morbid anatomy never faded, and accordingly he took a keen interest in the contents of museums, though books, which may be regarded as museums of observations and thoughts that would otherwise be isolated or lost, were his ruling passion. He was a great collector of knowledge, ideas, and of the affections of men, and that he was the beloved physician, the like of whom we shall not look upon again, was the outcome of his ideals "to do the day's work well and not to bother about the future", and "write me as one that loves his fellow men".

REMINISCENCE OF SIR WILLIAM OSLER *

SIR E. SHARPEY SCHÄFER, F.R.S., LL.D. (HON.), D.Sc. (HON.)

North Berwick, Scotland

IT was in the autumn of 1872 that I first made the acquaintance of William Osler. This was soon after he came to London to work in Burdon Sanderson's laboratory, in which I was the assistant. Sanderson introduced him to me as a young Canadian desirous of learning the modern methods of microscopy. These methods which were then new in this country had been communicated to me by Henry Moseley of the Challenger Expedition, who had studied them in Vienna, and by Klein, whom Burdon Sanderson had induced to come from Vienna to England to collaborate with him in work on the communicability of tubercle which was then engaging much of Sanderson's attention; it was indeed only by sheer bad luck that he failed to discover the bacillus itself. At that time Osler and I saw each other every day, for we were working at the same bench and were even engaged in a joint research which occupied much time but produced little result. The friendship then established between us lasted until Osler's death. He was a frequent visitor at my father's house, and, after my marriage in 1878, at my own house at Elstree, and later at Croxley Green near Rickmansworth, where I had built myself a country cottage. Many a quiet chat did we have there together, and here it was in the adjoining wood on one memorably hot Sunday in 1890 that he carved his initials on the young beech tree which figures opposite page 333 of the "Life." For these visits no invitation was ever necessary; a post card announcing his intended arrival was sufficient. After he had settled in Montreal, and later in the States, these visits became necessarily less frequent, but were generally at least annual. And even after my migration to Scotland he would still find occasion to spare an occasional week-end at North Berwick, where I had built myself another house.

In this way, as well as by correspondence and a constant exchange of books and papers, we were in close touch with one another for the best part of fifty years; and I eventually became his oldest friend on this side of the Atlantic. When I visited

* Received for publication in Second Impression, October 1st, 1926.

Canada in 1884 with my wife for the meeting of the British Association nothing would satisfy him but that we must stay in Montreal with his friends the Palmer Howards; and, at Toronto, must make the acquaintance of the members of his family, and especially of his parents, to whom he presented us as his best friends.

It so happened that except for a few delightful weeks which he spent in rooms near us at North Berwick with his wife and boy, during which we had many a round of golf and many a picnic together, I saw, if anything, rather less of Osler after he had come to live in England than when he was in America. But this in no way weakened the tie of affection which had been established between us; a tie which now alas! remains only a cherished memory.

APPRECIATION OF SIR WILLIAM OSLER

SIR WILLIAM HALE-WHITE, M.D., K.B.E.

London, England

THE work of William Osler's life is so well known by his oral teaching, by his writings, by the memories that have been written about him, that in the few words that follow I have confined myself entirely to personal reminiscences.

Osler and I met so often that it is difficult to recall the first occasion, but it was probably just thirty years ago. My wife and I went to spend a fine summer Sunday with Sir Edward Sharpey-Schäfer, at his house at Croxley Green near Rickmansworth and there we found Osler. We had a game of croquet, he played very badly but took it lightheartedly as we all did. This was the place where he cut his initials W. O. on one of the trees. Schäfer left Croxley Green, but since Osler's death he and I motored there to see if the initials still existed and he found them. My medical life, both as student and physician, has been spent at Guy's Hospital, to which Osler was much attached. His uncle Edward, who practised as a doctor at Truro, was educated at Guy's as was his teacher James Bovell, of Toronto, who was Astley Cooper's dresser and knew Bright and Addison. Young Osler was greatly influenced by him, browsed in his library, lived with him, helped him in his work, dedicated his Text-book to him and said "in him (was) all that one.... could desire in a teacher—a clear head and a loving heart."

Another of Osler's greatest friends was Mr. Wood, the rector of St. John the Evangelist, Montreal. He was a nephew of Aston Key, the Guy's surgeon. As his writings show, Osler had an immense admiration for Guy's as a school of Medicine. I remember his going there to dig among the old books in the library and he was one of the first to direct attention to the fact that the lectures on medicine at Guy's Hospital, given by Babbington and Curry, and published more than a century ago, showed that then it was common teaching at the Hospital that chorea was associated with rheumatism. He had a great regard for Wilks, he tells us how when working at Morbid Anatomy he relied on Wilks' and Moxon's well-known book, he speaks of "dear old Wilks" and in Volume I, of the Montreal General Hospital Pathological Reports, 1878, he quotes on the title page Wilks' statement, "*Pathology is the basis of all true instruction in practical medicine.*" About 1905 he came to stay with me and one evening delivered an address before the Guy's Hospital Students' Physical Society on the *Religio Medici*, of which he sent my wife a charming edition. The address was subsequently published by the Chiswick Press in 1906.

Shortly after the formation of Guy's Hospital in 1725 the Governors published that lengthy document "Guy's Will," to show to the public that they had faithfully carried out the wishes of the founder. The book has become rare. I chanced to tell Osler that I had long been on the look out for a copy. It happened that he, too, had been trying to find one. Shortly after he came across a copy, and gave it to me on the condition that I bequeathed it to the McGill Library, happily at the same time I also found a copy, so I was able to return Osler his and it now forms part of the collection of books which he made.

In August, 1894, he and I both took part in a discussion on pyrexia and its treatment, held at the annual meeting of the British Medical Association at Bristol, and the same year we met at Oxford for the gathering of the British Association when the Marquis of Salisbury gave the presidential address and Huxley replied. Later on we stayed in the same house in Exeter for the meeting of the British Medical Association there.

We examined together at the University of Cambridge and I met him in consultations. One I remember was the case of a young woman who was liable to attacks of angio-neurotic oe-

dema which caused sudden swelling of the uvula, soft palate and pillars of the fauces, and so might hamper breathing. At Osler's suggestion we advised that she should always carry about with her a small silver trochar to which a long silk thread was attached in case it should get into the trachea or oesophagus. With it her maid was to make many punctures into the swollen parts if breathing became difficult. She left London and we never heard if the trochar was used. We also saw together the American Ambassador, Mr. Whitelaw Reid. I used to meet Osler at Comitia meetings of the College of Physicians, at the dinners of the Physiological Society. I was present when he gave a literary lecture at the Royal Society of Medicine and when the two volumes of contributions from many writers published in his honour were presented to him by Clifford Allbutt. He often came to my house and when I chanced to be in Oxford I used to go to see him. He was President of the Section of Medicine at the International Medical Congress held in London in 1913. I was one of the Secretaries of the Section so we then met often and if he could not take the chair at a meeting I acted for him.

Many years ago, Kanthack, Garrod and I considered the launching of a high class medical journal for the publication of papers which, although of interest to those working at the scientific aspect of medicine, did not appeal to the majority of those in practice. I well remember Kanthack spending an evening with me to discuss the matter. His untimely death put an end to our plan, but when Osler became Regius Professor at Oxford the two of us left asked his help to revive it. He threw himself into the matter with enthusiasm and suggested that at the same time an Association of Physicians should be formed. Sir Richard Douglas Powell was asked to be chairman of a committee consisting of Osler, Rose Bradford, Garrod, Hutchison, Rolleston and myself. Douglas Powell asked us to dinner, and after dinner we set to work. The *Quarterly Journal of Medicine* with the above committee of six as editors was founded. It has appeared regularly every quarter since the first number was published fifteen years ago, and with the exception of Osler himself (he has been replaced by Elliot) the original editors still look after it. At the same meeting the Association of Physicians of Great Britain and Ireland was born, with Douglas Powell as its first

President, Herringham as its first secretary and myself as treasurer. It meets once a year in some university town in England, Scotland or Ireland. The meetings are always a great success. The number of members is limited to two hundred and fifty and there are more applicants than there are vacancies. Communications are spoken, not read, and no reporters are present.

One of the greatest compliments ever paid to me was that I was called in consultation in Osler's last illness. I went twice to Oxford to see him, he was always cheerful in spite of the weary weeks in bed, he spent much of his time in reading and the last time I left him he gave me a book he had just been reading, which is one of my most cherished possessions.

We often had talks on all kinds of subjects. He was especially anxious for the formation of Clinical Units. The head of each was to devote most of his time to teaching and research and to have under him young assistants to help in research, but Osler was insistent that the head of the department should be allowed some private practice, not because he could thereby add to his income, but because practice among all classes made him the better physician. Osler disliked examining and held rather a poor opinion of examinations, for the qualities in a man which they fail to reveal were such as appealed to him, but when examining a candidate he always treated him as a friendly equal and put him at his ease at once. To be examined by Osler was a pleasant, not a terrifying ordeal, he had so much human sympathy that it distressed him to have to reject anyone. He was full of kindness, whether or not a patient could afford to pay made no difference to him, but he maintained that those who could afford it should pay well for a good medical opinion, not that the doctor should become rich, but because it was desirable that, not having all his time occupied with making a living, he should have more for the study of his profession. Osler was a hero-worshipper, his heroes were mostly those who had contributed to medicine and general literature, and his chief delight was collecting books concerning them. He loved to have his books about him and if any point turned up during a meal which could be settled by reference he left the table at once for the required book. His knowledge of general literature was wide, but, as might be expected, he was often as much interested in the

writer, as in his writings. We had been talking about some writer—I forget whom—and were unable to settle some point. Osler was delighted when, the next time we met, I was able to announce that I had come across the answer to our difficulty. Another recollection is his pleasure at the publication of a new edition of Erasmus' "Praise of folly" and his bringing me a copy as a present. Such a mind as his was sure to be attracted to the history of medicine, his knowledge of this is shown in many of his addresses, he had a real personal affection for the past masters and to him is largely due the revival of the study of the history of medicine.

The most prominent feature of Osler was his friendliness, he had a liking for mankind and the happy gift of taking a real interest in others; he would go out of his way to look up people and if he heard of trouble he called or wrote for news; few can have had more friends. Whenever he came into a house an atmosphere of cheerfulness was diffused from him, and people enjoyed being in his company, it was impossible not to feel at your ease with him. He thoroughly loved meeting people and hence was most faithful in his attendance at gatherings of doctors, the more informal they were the better he liked them, the more red tape and ceremony the less happy was he. His perpetual youth endeared him to his friends and acquaintances, he was always cheerful, quick to see humour, tolerant of others however foolish, if he had lived to be a hundred he never could have become the prosperous, austere, or self-satisfied old man, puffed up with vanity. He was accessible to every one. The most humble individual could see him and talk to him, Osler made him feel at home at once and the conversation proceeded as between equals.

He belonged to the small class who do immense good in the world by their personality. He was a fine clinical physician, and his skill, thoroughness, knowledge, hard work and judgment would at any time have put him in the front of his profession, but the characteristics just mentioned, together with an indomitable energy and a genius for getting the best out of others, made him a renowned teacher, a great example, a power for good in the medical world, and gained for him the universal affection of his profession.

SIR WILLIAM OSLER'S WORK AT THE RADCLIFFE INFIRMARY AND FOR THE PREVENTION OF TUBERCULOSIS.

WILLIAM COLLIER, M.D., F.R.C.P.

Oxford, England

OSLER attended the Annual Meeting of the British Medical Association held in Oxford during July, 1904, and took a prominent part in some of the proceedings during the week. He, with Sir Clifford Allbutt, Mr. Jonathan Hutchinson and a few others received at the hands of the Vice-Chancellor the honorary degree of D.Sc. of the University.

Perchance the favourable impression he formed of the Medical School and its future during this visit induced him to accept the Regius Professorship of Medicine which had been offered him. It was actually on board the vessel which was to convey him home, that his decision was made. When it became generally known to Oxford medical graduates that he had accepted, the rejoicings were universal and sincere. It was felt that no wiser or better selection could have been made. Nine months later found him taking up his life in Oxford, and a very strenuous life it proved to be. The wards of the Radcliffe Infirmary were open to him and he was invited to make use of them in any way he wished, without any kind of restriction, for the purposes of clinical teaching, and this was all he asked for. He at once started a weekly clinical visit to the wards and all doctors and senior students were welcomed. His visits attracted a large class of medical practitioners who were eager to take advantage of his teaching. We soon recognized that he was no ordinary teacher, but one who could speak to us with an extraordinary first-hand experience of disease. These clinics were continued up to the outbreak of the War and were recommenced shortly after it was over. He also gave a weekly clinic for the medical students. Apart from this his visits to the hospital wards were frequent, he more than once told me that he was surprised at the number of remarkable cases he saw in so comparatively small a hospital. Apart from the teaching he took a very great interest in the development of the work of the hospital and attended with great regularity the meetings of the staff,

acting as chairman. What an excellent chairman he was! Never saying an unnecessary word, always keeping us to the point at issue and above all never allowing any of us to lose our tempers. He was indeed a peace-maker. Whenever anything was said likely to interfere with the harmony of the meeting, a humorous remark of Osler's would be quite sufficient to calm the troubled waters. Nor were his medical interests limited to the wards of the hospital. We found him a most enthusiastic supporter of our medical societies, always ready, often at great inconvenience to himself, to open a discussion or demonstrate a case—more especially was he anxious to help the division and branch meetings of the British Medical Association. He believed these meetings were specially valuable as they brought the country practitioners into friendly contact with their city colleagues. Largely owing to Osler's influence our medical meetings during these years reached a high water mark of attendances.

His vast experience often enabled him to make a very striking diagnosis on a difficult case. On one occasion during the War a patient was sent from a military depôt diagnosed as suffering from tetanus; he had been under observation for five or six days. While examining the patient Osler discovered that he had a left-sided pneumonia, and at once said the case was not one of tetanus, but of acute pneumococcal meningitis. A few hours later the patient was visited by the R.A.M.C. officer whose duty it was to deal with all cases of tetanus among the wounded soldiers in the various hospitals of four adjacent counties. This officer, after a careful examination of the patient was so convinced that it was a case of tetanus that he at once gave the patient an injection of anti-tetanic serum into the spinal canal. A day or two later the patient died and the autopsy proved that Osler's diagnosis was the correct one.

I can recall Osler's diagnosis of a few very obscure cases, based on an experience of somewhat similar cases which he had seen and remembered and which proved subsequently to be correct.

Of the many outside movements he was interested in, I think the treatment and prevention of tuberculosis was nearest his heart. It was by his desire and mainly through his driving power, that a branch of the National Association for the Prevention of Consumption was started in Oxford in 1910. A successful conference, at which most of the leading authorities on tu-

berculosis were present, and contributed to the success of the meeting by reading papers or taking part in the discussions, was held in the city, in order to attract the attention of the inhabitants to the subject. The success of this meeting was almost entirely due to the personal effort of Osler. He, himself, wrote a most admirable leaflet entitled "What the Public can do in the Fight against Tuberculosis." From the inauguration of this branch to the time of his death he acted as president and in spite of the many calls on his time he made it convenient to attend its fortnightly executive meetings. He did more than this, he frequently attended the tuberculosis dispensary and helped the tuberculosis officer in difficult cases. The secretary of the Association has put it on record, that he often went far into the country to see patients in their own homes and so got to know the hard conditions of poverty and bad housing many of them had to contend with. He always held most strongly that any hospital or sanatorium for the treatment of tubercular patients should be directly linked up with the county hospitals, and he was specially anxious that the Radcliffe Infirmary and County Hospital should set the example in this respect. His wishes seem likely to be fulfilled, for in recent years a large sum was raised by the Radcliffe Infirmary, and an estate purchased in the neighbourhood of Oxford, excellently adapted for the open-air treatment of tuberculosis patients, and immediate steps are being taken for the building of a hospital for the treatment of such cases.

I leave it to others to speak of his many other activities both at Oxford and elsewhere, of his genius for teaching, of his wonderful power of stimulating enthusiasm for work in others, and of his influence in moulding the character of the medical students who came under his guidance. The impression left on my mind is that his activities during his Oxford period could not have been less than they had been at any period of his life. Perhaps the most remarkable fact of all was this, that if ever a friend or colleague were ill he would invariably find time to look in upon him and cheer him up with innumerable little acts of kindness which meant so much to the patient.

I do not doubt that he was the same Osler at Oxford as he was in Canada and America. The kindest hearted and most lovable of men, one who never said an unkind word of any one, and who set a noble example to his friends.

PERSONAL REMINISCENCE

F. Parkes Weber

London, England

SIR WILLIAM OSLER was a source of inspiration to me. Amongst the mass of subjects in which he took special interest there were many in which I, in my way, was also interested. He greatly encouraged me on many occasions, and his encouragement was mostly of double value, because I felt that he had been or actually was himself working on the same or a similar subject—there was even perhaps an element of generous rivalry in his encouragement. He repeatedly gave me or obtained for me valuable information and told me that it was worth while telling me, "for I made good use of it." I should think he never tired of observing and collecting data and comparing them. That alone kept him always young to those interested in the same subjects; but this impression of youngness was much increased by his sense of humour and cheerfulness. He certainly appreciated the retention of general interest by old persons and when he wrote anything to me he nearly always added "greetings to the young man"—or something of the kind,—meaning my father. Once it was "cardiac greetings." He enjoyed life and work immensely, and did not believe that any feeling of contrast (past misfortune, difficulties, etc.,) was necessary for complete enjoyment of an active useful life.

WILLIAM OSLER*

Charles Singer, M.D., D.Litt., Oxford, F.R.C.P. Lond.

University College, London, England

PERHAPS only those who have known the medical school at Oxford both before and after Osler's arrival can estimate fully the change wrought by his personality, not only in the mechanism, but in the whole spirit. Among Osler's predecessors in the chair at Oxford have been men of the very highest scientific distinction, but few or none had that kind of knowledge which comes of a long life of clinical teaching and of a wide experience of a variety of medical schools. This was Osler's spe-

*Extracted by permission from the *British Medical Journal*, Jan. 10th, 1920.

cial asset, and it was associated in him with actual scientific attainments and humanistic sympathies that have probably not been found in combination to a like degree in any one medical teacher since the days of Boerhaave.

When Osler first came to Oxford medicine was, indeed, recognized by the university both by reason of the antiquity of the endowments that existed to promote it and because it was generally allowed to be a part of the *organon* of knowledge. But the school was exiguous in dimensions and in many ways cut off from other medical schools, and a large proportion of its students—and these among the most gifted—were men who came to medicine not as a first choice but after having completed a course in some other faculty. Excellent work was done in Oxford in those days under the most difficult conditions, but it is no injustice to a bygone system to say that in the nature of the case it could attract only the few.

With the advent of Osler all this was changed. First, his own manifold attainments provided a natural link with other departments. His enthusiasm for learning was, from his first settling in Oxford until his last public utterance, exerted in the direction of bringing the great resources of medical history, in the widest sense, into relation with the general cultural stream. This movement, he clearly saw, could not fail to react on the status and attainments of medical men as a whole. He had himself been the witness of so many changes in the practice of medicine, and his own thoughts and education had been so deeply tinged with the reflections of the past, that it was natural, in the eventide of his life, that he should turn so largely to tempering visions of what might be with musings on what had been. This extraordinary range of intellectual interests it was that chiefly marked him out and gave him his supreme quality—judgment. It is for the degree to which he possessed this quality, rather than as a pioneer or investigator, that posterity will remember him, as it remembers his great prototype Boerhaave. Not that either of these men lacked scientific powers or failed of scientific achievement. But it was their power of judgment, drawn, on the one hand, from great stores of experience, and, on the other hand, from great powers of vision, that gave them their quality as teachers and as inspirers of others, and their insight as physicians. It was certainly this that was the primary source of Osler's influence at Oxford.

As soon as Osler came to Oxford he recognized the need of bringing the academic teaching of medicine there more fully into touch with the realities of practice. He not only threw all his weight into the adequate development of the departments of pathology and physiology, but he immediately discerned the need and the possibility of an extension there of clinical teaching. He saw that Oxford, a town of between fifty thousand and sixty thousand inhabitants, could never become a great clinical school, but he knew from practical experience the special value that an academic atmosphere may give to clinical instruction and the value also that comes from an intensive study of material—a method either difficult or impossible in many busier centres. He thus succeeded in linking up scientific investigation and clinical experience. Nor will this method disappear with his direct influence for he has inspired and left behind him a number of younger and distinguished exponents who will carry on his tradition.

Osler was gifted with those peculiar qualities of heart as well as of head that made it always seem to those in his company that their own interests were his also; but the seeming was something more than a mere appearance—it was a reality. He possessed a remarkable sense of continuity, and this gave rise, on the one hand, to his love of antiquity, especially as expressed in the historical method, and, on the other hand, to his love of young people, and his constant desire to have active and moving minds around him. He was no mere antiquarian. It was the living past that appealed to him, the past that he traced in the present and foresaw in the future. For such a spirit Oxford was an ideal home: Oxford with its inexhaustible store of ancient memories and its young and progressive medical school, Oxford with the researches of its scholars and its scientists going on endlessly side by side. Into the heart of this complex place Osler did not creep but leapt, and became at once part and parcel of it, influenced by it and loving it, but never losing his own rich and complex personality that had been moulded by other forces of which, as yet, Oxford knew but little.

And so it came about that he retained in Oxford just those powers of making his surroundings react to him that had been discerned in him in other and less conservative environment. This was the secret of his power, and this it was which enabled him to raise the Medical School at Oxford to the position that it now occupies.

SIR WILLIAM OSLER AT OXFORD

A Personal Reminiscence

A. G. GIBSON, M.D.

Oxford, England

DR. OSLER, as he then was, arrived in Oxford in the summer of 1905 at a time when I was on a week-end visit there preparatory to setting up practice. I was privileged to meet him at Mr. Whitelocke's house where with Mrs. Osler and Revere he paid a Sunday afternoon call. We met again the next day in Professor Thomson's department, when to my surprise he remembered all about me, warmly applauded my intention of settling in Oxford and asked me to seek him out in the Autumn when he came into residence. From that time till his death in 1919 I rejoice to recall a friendship and a relation which on my part I regard as a son to a father—in a professional sense it was so undoubtedly. I did not regard myself as signalled out for favour, because there are many others both in England and across the Atlantic who must have received as many or greater benefits. In speaking of his Oxford life generally it is my intention to say only those things that I knew personally—there are many other aspects of which I might speak at second hand.

An immediate link was formed with the Radcliffe Infirmary where as Regius Professor he was appointed Active Consultant, that is, without actual responsibility for beds, he had the right to see any case, use it for teaching purposes and make any suggestions to the physician or surgeon in charge. Such an arrangement worked very smoothly, and surgeons as well as physicians had the benefit of his clinical wisdom; I do not remember any suggestion as to treatment not being acted on. As his University lectures he instituted the Tuesday afternoon Clinics—demonstrations on chosen cases for all that wished to attend. At first he thought to make them useful to undergraduates but such were hardly advanced enough to derive profit, so an elementary class on Physical diagnosis was given for some years for these alone. For the Tuesday Clinics special invitations were sent out to all the neighbouring practitioners,

who continued to attend in good numbers. Many came in from twenty miles distance and some of the Oxford practitioners seldom missed. Sometimes as many as twenty attended. For these Clinics and in other ways I was privileged to act as his voluntary demonstrator, making polygraph tracings, blood counts and various items of clinical pathology that he required to complete the investigation of a case. His unofficial visits, which were many, made at all times, were looked forward to by the permanent staff, House officers, sisters and nurses, for all of whom he had a cheery word or an offer to supply something needed or suggest some place where it could be got. He would "blow in" to the sister in charge of the stores, taste the cheese, look at the rice, and ask her if the tea was up to standard. We soon learnt that as a morbid anatomist Osler was a master, and we never sounded the depths of his knowledge. If he was in Oxford he invariably came to postmortems and if he happened to be away he notified his desire to see the organs or came and inquired what we had found. Nor was his interest confined to seeing and hearing; he would take up an organ, dissect and demonstrate the lesions to all around, and I have often wondered how he kept his sleeves from being soiled, for he never turned them up or bothered to use gloves.

He became at once the main consultant in Oxford and district apart from the many patients he saw from all parts of England and those who visited him from abroad. He knew every practitioner in the district; indeed made it his business to know him, not to increase his practice, but for what he could bring to them. The joy and freshness that he brought into some of these men's isolated lives ought to be recorded. They worshipped him. One senior practitioner in a country town near confessed to me that when he heard of his death he sat down and wept.

Oxford medical politics at the time of his coming and even always has a system and method of its own; but he cut right across it and, without being a reformer, made reforms easier; as one senior member of the University expressed it, his coming was like a sea-breeze that did us all good.

Osler's boyishness was seldom better shown than when in company with men of all ages. At Christ Church, where he was a Student, he dined on Sunday evenings during term; in

Common Room after, where the company partake of dessert and wine, he would sit at the lower end of the table amongst the juniors and keep pace with the wittiest. It is reported on good authority that he and another lively, though not a very junior Student, gave a dinner party in which the dishes were all extraordinary or rare, amongst them was one of roast sucking pig.

He presided regularly at the Staff meetings at the Infirmary and in the gentlest way pressed forward any new scheme that he felt worthy. He was on such occasions an excellent chairman, speedy, allowed no irrelevant talk, and turned off an awkward moment by humour. As Regius Professor he was also elected chairman of the Board of Faculty of Medicine, and though he never shirked its responsibilities its detailed and sometimes intricate business of curricula did not appeal to him.

During examinations his aim was always towards leniency and giving a man the benefit of a doubt. He exerted this strongly during the war when doctors were so badly needed.

Even during the darkest days (for him) of the War, his interest in the problems of clinical medicine suffered no diminution, and the last he touched was the blood platelets in the anaemias.

The story of his illness has appeared fully in Dr. Harvey Cushing's Life. But as it was my privilege during that time to see him daily it may be mentioned. Osler knew all along how serious it was, and it must be confessed that in the optimism he had taught us we failed to think or see what he knew and felt. Though racked by a cough that could not be kept in check, he wrote letters, saw people on important business and ordered little things to be done, little friendly acts to the humbler as well as to the greater of his friends.

Of Oxford it can be said that his spirit still lives amongst us; he has taught us to be more neighbourly even though competitors or opponents, and some continue to test their conduct in a dilemma by asking the question, What would Osler have done?

SIR WILLIAM OSLER AT OXFORD*

Archibald Malloch, M.D., M.R.C.P. (Lond.)

Montreal

IT is difficult here to do more than merely outline the life and influence of a great man during fifteen busy years of his life, and when the man is Osler the task is not more easy, so extraordinarily varied were his activities. Perhaps my close association with him during the past five years may make it possible for me to jot down some little notes of incidents in his life and of his conversations.

Those who knew him well will always feel proud, and at the same time humble, in the thought of their great privilege, and regret that so very many of his ardent admirers, who knew him only through the written word, were not, each one of them, able to see him and to converse with him; to hear him teaching at the bedside; to see him busy with his books; and to play with him. The moment one came near him one felt distinctly that he was a great and good man. The truly nobly proportioned head and forehead bespoke intellectual power, his face was kindliness itself, and that merry twinkle in his dark eyes gave proof of humour, which is so much akin to sympathy with one's fellow men.

I

So much a "servant of the public" at Baltimore, with every year his professional work becoming heavier and heavier, and at times "almost at the breaking point," Osler felt that to attempt to keep up would in a short time kill him. He was offered the Regius Professorship of Medicine at Oxford and accepted it. It was very hard indeed for him "to pull up stakes" and to leave his countless friends and so many pleasant associations. It was no new thing for him, however, for he had long before realized when leaving Montreal, and again on saying good-bye to Philadelphia, that such was the lot of a student and a teacher with a mission. And it was harder for him than for many other men as no one made so

* Reprinted with certain slight additions and omissions by permission from "The Osler Memorial Number" of *The Canadian Medical Association Journal*, July, 1920.

many warm friends amongst his *confrères* in the profession, and amongst those outside of it, as Osler did. He had a way of so entering into the life of a community in which he lived and worked, and of so infusing it with his spirit, that in some indefinable way it became Osler.

There was much to attract him in England and he knew it well from life in his post-graduate days and from numerous trips in the summer vacation. England offered him, in many ways, things that he could not find in the New World, and not least amongst these was Bodley's Library. And as he once said: "It was always my wish to live within an hour's run of the British Museum." The true student has that infinite longing for more, and I remember Sir William jokingly saying to me: "You know I came over here to get educated and to read the *Dictionary of National Biography.*" Before he died, he had read through nearly all of those sixty-three volumes and supplements. To-day all the little book-markers and manuscript notes in the fine set in his dining-room—a much cherished gift from some of his "boys" in Baltimore—bear witness to that fact.

Little did he know, or at least little did he say that he knew, that over here it was going to be just as impossible for him to spare himself. With each succeeding year the volume of his work increased. The physical exertion, however, was not quite so great as at Baltimore, and from the age of fifty-five to seventy years he was able to accomplish for his fellow man—it was never for himself, but for others that he laboured—what to many men would be counted a life's work.

II

At the Oxford Medical School only the primary subjects are taught, and for his clinical work the student goes to London, but finally tries his examinations for the M.B. at Oxford. Osler took a great interest in the organization of the various departments and in the teaching of the pre-clinical subjects, including pathology, and nowhere, one might say, are better courses offered in these subjects than at Oxford. It was extraordinary how Sir William sustained his interest in problems of Anatomy, Physiology, and Pathology; a student or post-graduate worker, engaged upon a special piece of work, was always sure of a visit from "the Regius" to see how he was getting on, to be asked if he had seen the paper of So-and-so

EWELME ALMSHOUSE COURT YARD

Photograph taken by M. E. Abbott, May, 1911

EWELME ALMSHOUSE AND CHURCH, OXFORD

Photograph taken by M. E. Abbott, May, 1911

on the same subject in a recent journal, or to receive an invitation to come and look over old medical books on the history of the matter.

The Regius Professor of Medicine is, of course, head of the School, but is required to give few lectures. Every Sunday morning during Term, however, Osler made rounds in the wards of the Radcliffe Infirmary, which, by the way, is one of the best of the County Infirmaries in England, and equipped with splendid bright laboratories, in the construction and arrangement of which Sir William played a great part. "Just to keep my hand in," he used to say of these weekly clinics. At ten o'clock sharp he was met at the gate by a band of waiting undergraduates, and all trooped up to the wards. He always had a word for some of the students, and often slipped his arm in theirs or patted one on the back. There was a kind and cheery word for the sisters, and in passing he would pop into the kitchen and sample the pudding for the day. Nothing could be more encouraging for a young fellow, and Sir William had a way of making you think of him as a student too, if also as a much senior one.

I have kept many notes of these Sunday morning clinics. I had often heard from his Johns Hopkins pupils of Dr. Osler's ward rounds, but the realization exceeded the anticipation. Just imagine a man beginning his clinical work under him and you will understand the privilege the medical student had at Oxford. Above all he taught them to use their eyes, and, if the light were not good, the bed was always swung around full in front of the window. Sometimes half an hour was spent in merely looking at a patient and in talking over the things that could be seen under Sir William's guidance. One somehow got the idea that he would never need more than his eyes to read the nature of the disease. The greatest gift a teacher can have is to so say things that they make an indelible impression on his students, and Sir William had a very remarkable way of doing this. I can see him now standing at the bedside, with one foot slightly in advance of the other and the outer edge of his shoe resting on the floor. By a curious movement of his head, he would allow his glasses to fall from his nose, and then he would enumerate points in the history, or the signs, one by one, on the fingers of his left hand. This was always accompanied by some singularly apt turn of speech, by a well-known quotation, or by some epigram of his own which made the fact

stick in one's memory. He himself always remembered facts in connection with cases of his own, and there would often follow a short account of "that case at the Montreal General Hospital," or of cases at Philadelphia, Baltimore, or Oxford. The history of the disease seemed to be always at his command and the student would be urged to look up Virchow's or Addison's original description.

He often confessed that he did not know the origin of a word or its exact meaning when he was dictating a note, and in his own medical dictionary, kept in the ward, the point under question would be looked up on the spot. Then, too, he would sometimes tell us of mistakes that he had made himself and the point would be further impressed upon our minds. Only a really great teacher will relate where he was at fault. If the case required the use of a microscope he would go to the end of the ward and make the examination himself and show us, for instance, what could be learned from an unstained drop of blood.

I remember that once, when Sir William could not get anything like a satisfactory history of a case, he turned away from the patient "John" and said: "It is sometimes a great advantage to have been a Vet., for you cannot be led astray by the history"—alluding to his work in comparative pathology in Montreal. For patients suffering from the strain of the war, mental and physical, he would say "acute Marsitis." When another was mentally deficient, Sir William described him as one "born with one layer of his grey cortex left out." The round of the wards would generally close about twelve o'clock with a visit to the children, and there he once told us of the three drugs with which one could practise in children's diseases, "castor oil for the acute cases, grey powder for the chronic cases, and paregoric to allow the mother to sleep."

Before we left the hospital Sir William generally called in at the Pathological Laboratory to see if Dr. Gibson had anything of interest. He was always informed when autopsies were going to be done and made a point of going over from his home to see them. In the winter of 1919 he made a post-mortem examination himself on a case of influenza with rare complications, and was as enthusiastic in working up the details of it as a young man. This case was published in *The Lancet*.

On Tuesday afternoons Sir William used to have a class at the

Infirmary more especially for instruction in Physical Diagnosis, and I remember him slyly poking fun at those who are able to go into the super-refinements of percussion. His comment on this was: "I am afraid I have not got a musical ear." It was interesting to hear him say that Grocco was the best man on percussion that he ever saw. At this period of the work he invited the students to his house for an evening in the library to tell them the story of Laennec and Auenbrugger, and to show them various editions of the works of these men. Sometimes, when the Oxford and County Medical Society gathered together, Osler gave a clinic for their benefit on Aneurism or another of his pet diseases.

Sir William's consulting work did not demand so much of his time as at Baltimore, but it is remarkable the number of patients he did see, both in Oxford and indeed in almost any part of England, when one thinks of all the other engagements he had. More than one medical man in the county of Oxfordshire has told me how much he owed to Sir William Osler's kindness in coming out to see obscure cases with him. On these occasions he would often have tea at the doctor's house and a romp with the "bairns." He could come out from the most serious case and be at once a child with them in their games and play all sorts of pranks. How these little children used to look forward to a visit from "the Regius!" Should a doctor bring a patient from some distance to obtain Sir William's opinion they would often be invited to remain for lunch or tea. Some word let drop, or some book mentioned by Sir William, could do so much to help a man up to the eyes and ears in general practice. It did not take Sir William long to learn the hobby of either doctor or patient, and they would receive some encouragement and advice, especially should the recreation lead them along the paths of the antiquarian. Few physicians have been able to learn to know their patients so intimately, for any uneasiness or sense of embarrassment on the side of the latter was quickly chased away by Sir William's gentle and kindly touch. To such insight as he was thus able to gain, was due, in a large part, his extraordinary power of picturing in his own mind the outlook for the patient, and of outlining the most common-sense treatment. No one ever knew better than he, that circumstances alter *cases*. Sir William has several times said to me: "Any success I have had as a consultant has been due to a knowledge of the proper use of digitalis and opium; look what Sydenham owed to opium!"

III

IT is not possible even to mention all Sir William's interests in Oxford itself, in and outside of the University. He was President of the Oxfordshire Association for the Prevention of Tuberculosis for nine years, and was a tower of strength to them in "the battle against this scourge." As one of the Radcliffe Trustees he did much to guide the policy in matters concerning the Radcliffe Library, where are kept most of the modern scientific books of the University; in the upkeep and improvement of the Radcliffe Camera, where the modern books of the Bodleian Library may be read; and in choosing the Radcliffe Travelling Fellows. His interest in the relays of Rhodes Scholars has become proverbial, and never did I see such an enthusiastic audience as on February 12th, 1916, when he told the story of his life to the Americans at an evening meeting of their club.

As Delegate to the Clarendon Press, he attended with the greatest regularity their weekly meetings, where its affairs were ordered. At these sessions it was discussed which books should be printed, or which should be reprinted, and these questions were extremely difficult to answer, especially during war-time, when there was such a drain upon the staff, and when economy was a necessity. He delighted in this work and sometimes after such meetings he would relate to us interesting anecdotes about the sale of books, or books that had been rejected, and perhaps tell us how the edition of such and such a grammar of some weird and outlandish language, published scores and scores of years ago, had just that week been exhausted; or how, for a certain classic to be reprinted, a fount of type was to be used which had not been employed for two hundred years or so. A copy of practically every book printed by The Press came to his house by right of his position and he would quaintly call these "the delicacies of The Press." For his own library many of these were kept, but how many people all over the world have received, as a gift from him, those on subjects of their own peculiar interest! This is only one way he stretched out a helping hand to his fellow man, especially to those in the third and fourth decades.

Before his arrival in Oxford Sir William was invited to become a Student of Christ Church. He was proud to belong to the college of Robert Burton, the author of the *Anatomy of Melan-*

choly, and of John Locke, the philosopher and physician. They had both been close friends of his for years, and the book of the one, and the medical side of the other, formed subjects of two of his essays. He spent much time in arranging their books in the college library. Every Sunday night Sir William dined "in Hall" and he scarcely ever went without taking a guest as well. He also had delightful rooms at "The House," which often were occupied by a visitor who could not be "squeezed in" at home.

At Ewelme, fourteen miles from Oxford, one of the most picturesque villages of England, Alice of Suffolk, granddaughter of Geoffrey Chaucer, founded in 1437 an alms-house for thirteen old men of the district, and in the beautiful church beside it she lies buried. The Regius Professor of Medicine is Master of Ewelme, and Sir William took a lively interest in all its affairs. Sometimes he was able to steal away and stay there for a short time in the Master's rooms. He found all the old records a mass of mould, but left them bound together in huge volumes preserved for all time in a fire-proof safe in the muniment room. What a delight it was for him or Lady Osler to take visitors out there to that peaceful and secluded spot!

Perhaps Sir William's greatest interest at Oxford outside of his medical work lay in the Bodleian Library. He was one of the eight *ex-officio* Curators and no one could have been keener about its history since the time when the Founder "set up his staffe at the Librarie dore in Oxon." It is astonishing how soon after Sir William arrived at Oxford he became an acknowledged authority on the history of many of her institutions. It is surprising, too, that he so quickly could tell one about the "treasures" which were to be found beneath the roof of Bodley's Library, but of course many of them were well known to him even before he came to England as more than a bird of passage. As with the books, so with many of his interests, his memory was almost unbelievable. How he found time to read the scores of sale catalogues in odd moments, it is difficult to imagine. Not only could he tell one the dates of hundreds of first editions and in which great library or in whose private possession they were, but also he was often able to say which was the best edition, and give "association" details of the wanderings of rare ones.

In his half hours of reading in bed, every night for forty or fifty years, he covered everything at all worth while, poetry as

well as prose, and he seemed to retain it all and be able to tell you where any line of verse came from, and could often recite the poem. One day he set a hoax examination paper in Honour English for some girls staying in the house, which would have stretched the *pia mater*, almost to breaking point, of any learned professor of literature!

His memory for his own medical cases, or for those of other men of which he had read, was of the same high order, and of his knowledge of pathological specimens, illustrating some very interesting point, the same might be said. He was able to recall to mind in which museum of Canada, the United States or of Europe, they were to be found. His remarkable memory came through nurture as well as by nature, and he was constantly and quietly verifying it; and, from his work as a teacher, certain details were always before him. Then, too, he had a way of telling one about things that he had just read, and facts were ever being reimpressed upon his mind.

For "The Bodleian" Sir William did yeoman service, and it is largely due to his initiative that many of the important moves have been made in late years. To the visitor's eye "Bodley" with its Duke Humphrey's Library and Selden End, is the outward garb of ancient learning, and little does he suspect that beneath the grass plot, which separates the Camera from it, there lies the huge cavern of the Underground Bookstore, with room for about a million books which will be penned in future years. Sir William was largely responsible for this innovation, and it is equipped with the most modern of bookcases on rollers in order to save much space. He urged that a room be set aside for research in the History of Science, and here in the Camera are to be found collected all the necessary books of reference; very well, too, has this room justified its existence. A room was also made ready for the students of Music, and a display of the Oriental rarities was some years ago arranged—ideas of his which were put into execution. At his suggestion the *Bodleian Quarterly Record* was started and it is now flourishing. When, in 1906, the Bodleian First Folio of Shakespeare was bought in again, his solicitation of old friends brought some of the large subscriptions.

What a treat it was to see him take those little flights of steps, two or three at a time, which led up to Bodley; they are arranged with short landings between, but never did he have to rest! He

went up them like a young colt, and one felt that here was a time when a few minutes were free for him to enjoy one of the greatest delights of his life. He was scarcely ever able, at least during the War, to remain long with the books and his little papers of notes. These brief visits, however, seemed to mean much to the whole staff from Bodley's Librarian down to the little youngsters who scurry about fetching books; an inquiry here as to how the work was going on; a joke with an old Don, with whom perhaps no one had ever dared joke before; a sly dig at another staid and serious student, deep in manuscript lore; and all went more merrily on their way. Going down again, as his heels and toes clicked on the steps and landings, he used to say: "You know one must always take them in a certain rhythm."

IV

Sir William Osler's knowledge was so sound on medical questions and on matters of education that there was hardly a committee concerned with these problems which did not have him as one of its active members. He had a deep and abiding interest in the Royal College of Physicians, and as often as was possible went to London to the meetings there. He was steeped in the history of the medical men who, in times gone by, were Fellows or held the high office of President. Only last year he told me that a close neighbour of his in Oxford would, in a short time, have been a Fellow for the long period of sixty years, and suggested that a letter of congratulation should be sent to him on the anniversary day. Sir William was very pleased if he could find for the College, and present to it, a book which was not already amongst the old volumes in the library. We know how much he would have liked to have been President, but that could not be unless he lived in London. He was a Fellow of the Royal Society and his splendid collection of books about it testify to his great interest in its history.

During the War he was a Civilian Member of the committees at the War Office, and on medical questions, such as the establishment of Special Hospitals, his advice was invaluable. I fancy that many of these ventures, for it was a war in which much that was new had to be thought of to meet changing conditions, were due to his suggestion. The Director General of Medical Services used often to write long letters to Sir William, in his own hand,

seeking his advice and opinion on many important questions. Then, too, Sir William was on the committee concerned with the Medical History of the War and on the War Reports Committee. We Canadians know what valuable aid he lent to the Canadian Army Medical Corps.

Sir William was an Honorary Colonel, and, although not "called up," he paid a weekly visit as a Medical Consultant to the Duchess of Connaught's Red Cross Hospital at Taplow. Those who were privileged to accompany him on his tour of the wards will never forget his bedside talks. It was there that he got to know well the medical officers of the C.A.M.C., and how many were pleased to be asked about some medical relative, whom Sir William knew in days gone by, or to receive a tender inquiry for a doctor who lived in their own town! As Consultant he also went to Beachborough, to the Heart Hospital at Hampstead or Colchester, and to the American Hospital at Paignton. Later on he made a point of visiting as far as possible all the American hospitals in the south of England or round about London. What a help he was to countless men at these places! On the receipt of a cable, requesting him to do so, he would go anywhere to any hospital in England to see a Canadian or American soldier, and reply at once with a message to the anxious parents that all possible was being done.

Sir William was on the Council of the National Association for the Prevention of Consumption and other Forms of Tuberculosis, and last autumn was prevented by his illness from delivering an address at their gathering. He was one of the founders of the Association of Physicians of Great Britain and Ireland and an Editor of the *Quarterly Journal of Medicine*. He would scarcely ever decline to act on any committee or commission, no matter how heavy the work it might involve or how many trips to London, if only he thought he could be of service toward the common weal. I remember one week during which he had to be in town every day. Thus he undertook the work of a member of the Venereal Commission and a still greater task on the Royal Commission on Education in Wales. In the summer of 1916 he made a trip through Wales in connection with that work, which greatly interested him. Through his help a very large endowment was obtained for education there, and after that trip he used to say: "They seem to think I run the University of Wales." He was on

the University Grants Commission, and through his death a loss was sustained which it is difficult to estimate. His ideas were so clear on what should be done in any matter of this kind that it was wonderful to see him sit down at his table with a sheet of paper, and, in a surprisingly short space of time, draw up an outline of a very large scheme. It has been an idea for some time to establish an American hospital in London, and I can see him now sitting up in bed in his last illness sketching out a plan of the various services and departments that he thought should be part of it, to send off to the meeting which he was unable to attend.

Sir John MacAlister has told me of the scheme which was so dear to his heart and of what a help Osler was in carrying it through after the death of Sir Andrew Clark. This was to unite sixteen or seventeen of the various Medical Societies in London, and in 1907, when the Medical and Chirurgical Society became the Royal Society of Medicine, this was accomplished. Sir William was the first President of the Section of the History of Medicine and was always the very inspiration and moving force at their meetings. During the War his experience and sane judgment were of the greatest value in the discussions in such diseases as Paratyphoid, Cerebrospinal Meningitis, and War Nephritis. The Fellowship of Medicine largely owes its existence to Sir William, who wished the post-graduate medical teaching in London to avail itself of the wealth of material at all the hospitals. He became its first President in 1919. Sir William was President of the Classical Association that year and, on May 16th, 1919, gave his address in the Divinity School at Oxford on *The Old Humanities and the New Science.* Who could have been better qualified to speak on both of these at one and the same time? A distinguished Johns Hopkins colleague was there to hear him and remarked: "That is the best thing he has done."

To go up from Oxford with Sir William for a day in London was a great treat, but for a much younger man like myself was very strenuous. His staying power and energy were marvellous, and I could not help trying to picture to myself the way in which he must have run about Montreal years ago. It was no uncommon thing for him to trot from "the General" to the Old Medical Building, and some of us know what it is like to try and do that. On the way up to Paddington Sir William would read medical journals. As soon as we arrived, we would dive into a "tube,"

and on one occasion went to Guy's. There we went over the wards and saw a wonderful case of arterio-venous aneurism. We then hurried off to Out Patients and saw the neurological cases of the day. After lunch in the hospital we were at an operation on a case in which Sir William was interested, and after that we were off to the Manuscript Room of the British Museum. There was time still to take a "tube" and pay a visit to Quaritch, where they had some rare volumes for Sir William to see. Then to the Bibliographical Society where we had tea before the meeting. Osler, although an amateur amongst a host of men whose life-work was with books, was their President for seven years up to the time of his death. At these meetings he was the life of the party, and after a very technical paper, discussing some of the deeper things of book-lore, one was always sure to hear from him some shrewd remark or playful touch. We were in time for the train to Oxford and he was again back at the medical papers, but I, alas, felt much more like snoozing!

Sir William, after he had come to Oxford, quite often delivered the Address at the beginning of the session of a Medical School in London or elsewhere. He was much sought after for these occasions, and last autumn was unable to accept at least two invitations to address the students, as he desired to finish the new edition of his text-book.

V

IT is hardly any exaggeration to say that almost every medical man from Canada or the United States, who came to England for any length of time, went to Oxford to see Sir William Osler; this was also the case with many visitors who were not of the profession. Such was quite obvious to me when I was in England and stayed at Norham Gardens in 1912, so it seemed perfectly natural, when on the *Lusitania* in November 1914, to hear an American unknown to me say to a friend: "The first thing I want to do when we reach England is to run down and see Osler." Even more than before the War the way in which a friend or stranger was received at Oxford by Sir William Osler and his wonderful helpmate, during the four years of the struggle, convinced one that the name of "The Open Arms," first given to their house by an Oxford undergrad, exactly described it. All were welcome, and all at once were made to feel that they were at home, invited

to stay for a meal or to remain for the night. Sir William and his wife knew so many people all over the world that the visitor was bound to find friends in common with them. It is extraordinary, but in the course of one year during the War fifteen hundred people were there for at least one meal. The Oslers regarded this as part of their War work and none did more than they for the stranger in England.

How Sir William got through the heavy day's work, I do not know, for, from ten o'clock in the morning on, he was never sure of a free moment to himself. He would often run to the door to meet those he expected, and when a caller left, you could hear him saying good-bye and his cheery "So nice to have seen you; my love to the boys." From some of the Canadian hospitals in England, doctors and nurses were invited in turn for the week-end. The medical staff of whole hospitals would sometimes be invited *en masse* to spend the day, and the 3rd of December, 1915, was one to be long remembered by the medical officers of the Harvard Hospital. Sir William had arranged a programme as he alone knew how to do such things. This included a visit to the Base Hospital, the 3rd Southern General, in the Examination Schools; a memorable lunch "in Hall" at Christ Church; a demonstration of some of the newer methods in the Pathological, Physiological, and Anatomical Departments; a tour of the Radcliffe Infirmary; tea at Norham Gardens; and last, but not least, an exhibition of some of Sir William's great medical books, which are in the *Bibliotheca Prima* section of his wonderful library. He took them up, one by one, fondly in his hand—they represented years of patient collecting—and talked in his inimitable way about each; telling why they stood for so much in the History of Medicine; whilst he at the same time sketched the life and character of the authors. Some of the men were so keen that they stood around the room, notebook in hand, jotting down notes of all he said.

It was Sir William's and Lady Osler's real love and interest in everyone which made it possible for them to do what they did. In *Abroad with Jane*, the author tells us of Osler—giving him the pseudonym of "Sir Richard Holter"—"his great line is the direction of human life. I went about with him for a day and a half, and wherever he went he was directing human life, and wherever he touched it it seemed to go lighter and more blithely." Men and women

from all over the British Isles also came to see him; to ask advice as to where they should set up in work; what problem they should attack; to see whether he would recommend them for posts in far-off parts of the world, in China, South Africa, or New Zealand; or to bring to him for criticism papers they had written. How sympathetic he was with the man who in his own mind thought that he had made a discovery of far-reaching significance! Sir William's position was truly unique, and it is very doubtful if ever in one man we shall see again the influence that was his amongst mankind throughout the world. It seemed that he dwelt in Oxford as an Ambassador of North America. Each and every one of the hundred and ninety American officers and men who studied for the Summer Term in Oxford in 1919—an arrangement which, to a great extent, owed its being to Osler—will be the spreading centre in every state, from the Atlantic to the Pacific, of good feeling and sympathetic understanding of England and the English.

Throughout the greater part of the War Sir William wrote practically all his own letters. How he got through them it is almost impossible to understand. At one time he told me: "They think I keep a correspondence agency." Those who could not go to him wrote to him, and all received a prompt reply. And they wrote to him on all kinds of questions; one correspondent asked where "Twilight Sleep" was to be got; the next, perhaps a neurasthenic doctor from far-off New Orleans, wrote inquiring about the significance of his own symptoms; another sought knowledge of affections of the pineal gland, in which he had been told Osler had great interest(!); and still another was a child thanking him for a packet of bull's eyes. One day, although he had been to London and back, he sat at his table, after dinner, wearing his beloved red jacket, finishing off the letters of the day; I remember him saying as the last was finished and he went off to bed: "Well, that makes forty-one cards and letters." Let us hope that at least some of these brought him from a book-dealer, or auction sale, treasures that were dear to his heart. Nothing was too much bother for him to do for anyone; should he see a paper in a medical journal which interested him, he would immediately write a word of congratulation to the author, not necessarily known to him, asking at the same time: "Are there any reprints I can send you?" One young American doctor, who came with a letter of

introduction, casually remarked that he was going to Edinburgh the next day, and Sir William at once said that he must go and see So-and-so, and insisted upon sending off two wires and writing a couple of letters.

VI

Of the War Sir William seldom spoke, but on rare occasions he could show that he had a very clear idea of the events that would take place. Was it of himself that he wrote? "The silent unit, the single grain, will win the war. In this world's crisis it is the spirit of the individual worker—in trench or camp—factory or farm—that keeps the mouth shut, the heart fixed, and the hand steady. The call is for silent sacrifice, of time, of habits, of comforts, of friends, and of those dearer than life itself—the sacrifice of sanctification in the old Hebrew sense." It was only possible for him if he adhered to his philosophy of the conduct of life, and this he was enabled to do by reason of his life-long habit of working for the day. What feelings of anguish must have been his, midst forebodings of the great sorrow which was in store for the loving parents. When the heavy loss came to them, he said: "I knew from the beginning of the War that this would come." To foresee it did not make it easier to bear; though, as he wrote at the time: "The seen arrow slackens its flight." He showed that he was "ready when the day of sorrow and grief came to meet it with the courage befitting a man." This he said at the farewell dinner in New York, was one of his ideals.

Bereft of their dearly-loved son, they went about their daily tasks, with no outward show of grief, but with a sad gnawing at their hearts within. To her, sorrowing too, but standing upright at his side, he turned for comfort and support; and she, who had been his stay and helpmate in all his work, gave him power to bear it to the end.

Of late he sometimes spoke to me of the chance of his not living long; and when his illness was upon him, he saw clearly from the first that there could be but one end. With calm fortitude he bore the suffering and pain and never uttered plaint.

> But now he hath begun
> That which will nere be done,

and she, and we, are left alone.

SIR WILLIAM OSLER AND AN OXFORD MEDICAL STUDENT

Wilburt C. Davison, M.D.

Baltimore, Md.

"IT is not done at Oxford. Your only hope is to appeal to the Regius Professor, Sir William Osler." That was the only encouragement I received in my request to take two years' of preclinical work during my first year at Oxford. That encouragement did not hearten me much, for all my life I had heard of Osler as the pinnacle of medicine and, in spite of my six feet and two hundred pounds, I was somewhat terrified at the thought of meeting him. However, I finally decided that nothing worse than a refusal could result, so I telephoned for an appointment and went to 13 Norham Gardens. Imagine my surprise when Sir William himself answered the door bell and, with one arm around my shoulders, propelled me into the drawing room and presented me to Lady Osler as "the latest American colt." Lady Osler and Sir William soon made me feel that I had two friends at Oxford, and my devotion to them was immediate and permanent. In leaving, I mentioned my request, but, before I could marshal the argument in favour of the plan, I was told that I could do anything I pleased, that if I failed I could repeat the courses, that if I passed I would have gained that much more time for clinical and research work during my second and third years, and that I must drop in for tea on Sunday. (As the final Physiology Schools at Oxford were the only examinations I had during my whole medical course, I have never known whether the plan was successful). This extremely friendly and informal reception, instead of the awe-inspiring one I had expected, was the first of many delightful memories I cherish of the Oslers.

At tea the following Sunday, many visitors presented letters of introduction and each one received the same gracious welcome. Even one Fabian student, who demanded of "the chief" whether he preferred to be called Sir William or just plain Dr. Osler, was put at ease by being told "just plain Dr. Osler." On another occasion, I heard the same question asked by an individual whose very loud voice was making general conversa-

tion difficult. Sir William's reply of "I answer to hi or any loud cry" was so gently and amusingly given that the questioner did not feel rebuked and yet profited sufficiently to lower his voice for the benefit of the others present.

It was Sir William's custom to dash into the various laboratories and to ask amusing and often disconcerting anatomical questions of students who were dissecting, or to look down the microscopes and inspect the cultures of those studying pathology and bacteriology. All of us felt that the "Regius" took a personal interest in us. Even during my first year, I attended his ward rounds every week at the Radcliffe Infirmary, and although I had great difficulty in understanding many of the medical terms, and still more in spelling them, I was occasionally delegated to write on the histories the notes he dictated. I may not have learned much clinical medicine at this stage, but I believe my preclinical work profited tremendously, for it was made more interesting because its clinical application and significance were made so apparent. By attending Sir William's ward rounds, while a first year student, I was unconsciously performing an experiment in medical education which is now part of the curriculum in several medical schools.

One of the most delightful features of the medical training at Oxford was Sir William's interest in historical medicine. At intervals throughout the year, he would invite six or seven of us to his home and after dinner bring out many of his precious books. We would spend hours in poring over them while he explained the part Avicenna, Paracelsus, Leonardo da Vinci and others had played in medicine. These evenings gave us a background that was invaluable.

Just before the long vacations at Christmas, Easter and during the summer, he would ask us our destinations and then supply us with cards of introduction to the leaders of medicine at these various centres. In no other way could we have obtained such facilities for study in London, Edinburgh, Dublin, Paris and in Germany.

The outbreak of war in 1914, of course, completely changed Oxford. Sir William was made consultant to numerous military hospitals, practically all of the British medical students joined some branch of the service, and we Americans served in Red Cross Units in England, France, Belgium or the Balkans. I

returned to Oxford for the spring term of 1915 to take Physiology Schools, and remained as an interne in the Radcliffe Infirmary. I had become very interested in bacteriology, especially that of enteric and dysentery, so Sir William allowed me to accompany him on many all day trips to Cliveden to study the cases there. Sir William could read and digest medical literature more rapidly than anyone I have ever met. He would start the day's journey with ten or fifteen journals and at the end of two hours had completed a survey of them, while I had read only a few of the articles which he had recommended.

One day in August, 1915, he telephoned me that he had just received a telegram from Dr. R. J. Beal, head of the American Women's War Hospital at Paignton, stating that a convoy of jaundiced patients had just arrived from Egypt. "I am sure that they are cases of Infectious Jaundice or Weil's disease, and I have telegraphed Beal that I am sending you to study them." He gave me Sandwith's book on Tropical Diseases, which contained an article on Infectious Jaundice, and I collected a supply of material for blood cultures and a bacteriological text book, and started for Paignton. I was sure that Dr. Beal would be annoyed at having to meet and make arrangements for a second year medical student so, in order that I might at least know something about Weil's Disease and not be a total disgrace, I diligently studied Sandwith's article during the long train journey until I could recite it word for word. It was fortunate that Sir William had given me that book for Dr. Beal had sixty patients ready for inspection as soon as I arrived. All of them had passed the acute stage and were no longer jaundiced, but by asking them about the various symptoms and signs that Sandwith had described, I was able to confirm Sir William's original diagnosis and also to hide my ignorance temporarily. In accordance with my instructions, I made as many blood cultures as possible, but all except one were negative. That culture contained a *staphylococcus albus* which even I knew was a contamination, and not the cause of Weil's Disease. The etiological agent, *Spirochæta icterohæmorrhagica*, was discovered a year later in Japan. Sir William came to Paignton a few days after my arrival, and was as disappointed as I had been that there were no acute cases to study, for he was tremendously keen to find the cause of the disease.

Sir William was very helpful to us internes at the Radcliffe. He made frequent ward visits and, in addition, instructed us to telephone him whenever we needed advice. Cases which seemed very complicated to us were soon simplified after a consultation with him. I was much mystified by his requests for blood platelet counts and by his knowledge of their variation in different conditions. It was not until years later that I learned that Sir William had been among the first to study blood platelets.

In April, 1916, Wilder Penfield, another American medical student, telegraphed me that he had been injured when the *Sussex* was torpedoed. Sir William immediately telephoned the Dover Military Hospital to make arrangements for him to be brought to 13 Norham Gardens, and insisted on his remaining there until his injury was healed.

Revere Osler had been an undergraduate at Christ Church, his father's College, before the war but it was not until he came back to Oxford on leave that I learned to know and love him. He had all of his parents' charm. Dr. F. H. Mosse, the Medical House Officer at the Radcliffe, was an ardent disciple of Izaak Walton, so that Revere frequently visited our mess to discuss fishing, for next to collecting books, this sport was his greatest recreation.

Sir William's interest in his students did not cease after they had gone down from Oxford. Even though he had no secretary during the war, he would write frequently to us, encouraging us in any work which we were doing, and giving us advice and suggestions.

After the Armistice I went from France to Oxford. Sir William and Lady Osler were then making a brave fight against their, as well as our, terrible loss, but their interest in former students was unabated. Seeing them again was like coming home, and I felt what a great contrast my present devotion was to the awe and timidity with which I had rung that bell in 1913.

A MEDICAL STUDENT'S MEMORIES OF THE REGIUS PROFESSOR

WILDER PENFIELD, M.D.

Presbyterian Hospital, New York

THE first meeting with one's hero is sure to be a memorable occasion and my introduction to Osler is a cherished memory. The first Sunday after becoming an Oxford medical student, I bicycled out to Norham Gardens with a good deal of trepidation.

The butler showed me into a very full drawing room, and, after announcing my name in a voice which seemed unnecessarily loud, deserted me. I waited, much abashed, for a time that seemed an eternity. There were students there, both English and American by their speech, and a number of young ladies, also older people who might be Dons and their wives. My introduction to the Dons of my college had been a particularly chilling experience and my fellow students had so far completely ignored me. I, therefore, steeled myself against the prospect of a cold plunge. There was a pause in the hum of conversation and many eyes turned toward me. Then Lady Osler came forward with a smile that said welcome. I found her then, as always on subsequent occasions, a perfect hostess and was somewhat reassured. "Sir William," she said, "is over here on the floor." At the far end of the room we found a young officer stretched out upon the floor and Sir William on his knees bandaging an imaginary wound with his pocket handkerchief. The explanation of this strange scene was to be found in the ecstatic applause of two little children. They called the kneeling man William and he was evidently a beloved companion. He got up and came to meet me laughing.

He drew me aside for a talk. When I began to tell him that my tutors were condemning me to three years of study instead of two, he said, "You don't want to take three years to this work. You are twenty-three years old? Why, you're an old man. I think I can fix it up. I'll see you on Tuesday." And he clapped me on the back while my heart took a bound. On Tuesday I found that my problems, which had seemed in-

surmountable, were quite simple in the face of his contagious enthusiasm.

Although he gave us no formal lectures, Sir William made possible many contacts with the medical students. One morning, he watched me for a few minutes trying to perform my first autopsy. "Splendid! Splendid!" he exclaimed at last. "It is always better to do a thing wrong the first time." Whereupon, he took up my instruments and showed me how to do it correctly.

For my closest acquaintance with the Osler household, I have to thank a broken leg received when the Sussex was torpedoed. On arriving at the Military Hospital at Dover, I found a telegram from Lady Osler, an invitation that warmed my heart. Sir William discovered the name of the medical officer in charge of my ward and sent Captain Linnington a message in a letter to me about a case the latter had reported. This served as an introduction for me to the medical staff and made my stay pleasanter than it otherwise would have been.

As soon as travelling was possible, I went to Oxford to complete my convalescence with the Oslers. It was at the time that Revere was at home awaiting the transfer which he had requested from his comparatively safe Captaincy in the Royal Army Medical Corps to the Artillery. There were many ties between father and son, for example, the passion for old manuscripts. In this companionship there seemed to be no inequality due to difference in age.

What a joy it was to me to be a member of that household. They insisted on my playing the invalid. Each morning after breakfast Revere came into my room to offer his services. Sir William, then, usually appeared in his red smoking jacket and stood with back to the fireplace to tell us some lively anecdote. He soon departed laughing, accompanied by Revere, Sir William to his library and morning letters. The library opened on to a terrace which was my accustomed seat later in the day. Below the terrace was a lawn and garden full of the freshness of an English Spring and beyond through the trees were glimpses of the Parks. Birds sang in an ever changing chorus and the war seemed very far away. But I knew as they sat often on the terrace steps and talked with Revere about his plans that there must be secret dread in the hearts of the par-

ents, perhaps a foreboding of the fate that lay in store for the boy.

Sir William often came out from the library to drop a book on my table and disappear. The book might be in any language. He recognized no obstacle in the pursuit of knowledge and expected the same attitude even in a medical student.

Sixty-nine years had passed over him lightly. He often ran upstairs two at a time. None of his interviews were long. If necessary, a tedious visitor was turned over to Lady Osler who entertained him with long suffering patience, while her husband escaped, leaving the visitor in a glow because of his friendly parting.

That Spring Shakespeare's Tercentenary was celebrated in Oxford and Osler was called upon to read a paper. His subject was "Creators, Transmuters, and Transmitters." He wrote it the day before the celebration and read it to us that evening. It was a beautiful piece of writing although done so quickly, as he seemed to do everything. He frequently left the dinner table before coffee was served to retire to his library but he never worked late at night. He often emerged in the middle of the evening to talk for awhile and regularly at ten o'clock, he was in bed.

A stimulating faith in fellow-men characterized all his relationships. He would frown when he heard anything said against an acquaintance and quickly come to his defence. If I summon before me my highest ideals of men and medicine, I find them sprung from the spirit of Osler.

REMINISCENCES OF SIR WILLIAM OSLER IN ENGLAND

Wu Lien-Teh (G. L. Tuck), M.A., M.D. (*Cantab*)

Hon. LL.D. (Hongkong), Litt.D. (Peking), Sc.D. (Shanghai)
Director and C.M.O. of the Manchurian Plague Prevention Service,
Physician Extraordinary to the President of China,
Sometime Scholar and Research Student of Emmanuel College,
Cambridge, etc., etc.

AT the last moment, owing to an accidental meeting with one of the Editors at Baltimore, I have been asked to write a few words about my connection with Sir William Osler in England. It began in this way.

The great Manchurian Epidemic of Pneumonia Plague, 1910-1911, killing nearly 60,000 persons in Manchuria and North China within the course of five months, had just been eradicated, and at the invitation of the then Imperial Chinese Government, scientists from eleven countries were sitting at Mukden (capital of Manchuria) to discuss the epidemiology and future methods of prevention of this terrible disease. Among letters received by me as President of this Conference was a very kind one from Sir William Osler, who had just received a baronetcy at the coronation of King George V of England. Sir William congratulated the Chinese doctors on their splendid fight against the plague, and requested me to supply him with the clinical and pathological aspects of the disease which up to that time had been so little known. I gladly complied with the wishes of so eminent a man—perhaps the most renowned of all English-speaking physicians then living. The little information so supplied promptly appeared in the next edition of his famous *Principles and Practice of Medicine*, which had already been translated into Chinese and other foreign languages.

Thus started a correspondence between Sir William Osler and myself which, though infrequent, was regular, and these letters are now among my most treasured possessions.

When Sir William learnt that I was attending the Hague Opium Conference in 1911-1912 as a delegate of the Chinese Government, he invited me to visit him at Oxford, where he had

been Regius Professor of Medicine since 1905. At the earliest opportunity, I proceeded to that ancient English seat of learning, and for the first time met my distinguished friend face to face. He was all that I had expected of him—and more. Though always busy, he never seemed to be in a hurry or anxious to get rid of you. For a great man he was modesty itself, and whenever he asked questions about my country or my work it was with true humility. But I soon found out that he had read widely about most lands, and knew more than he cared to confess. Confucian philosophy interested him as much as the incidence of pneumonia and diabetes among oriental people, and I often found myself hard-pressed on matters relating to the history of medicine in China. When he placed me in a fix, his hearty laugh, so well-known, at once came to the rescue and I immediately lost my embarrassment. Osler's knowledge of the comparative history of medicine, especially of medieval Europe, was indeed profound, and I was not surprised that in his later years he devoted much time to the encouragement of a more intensive study of the subject. Few will contend that the wonderfully efficient Museum of Medical History, first located in Wigmore Street, and now removed to Endsleigh Gardens, in London, owed a great deal of its success to the unstinted help given by Osler to Mr. Henry Wellcome, the founder, and Mr. C. J. S. Thompson, its life-long Curator. While at Oxford, I was also introduced to Lady Osler and their only son, a very promising lad, who alas, was so soon to lose his life in France (1917) during the World War.

It is generally acknowledged that the appointment of Sir William Osler to "sleepy Oxford" (as we rival Cantabs are so fond of dubbing our senior sister 'Varsity) meant a distinct awakening of not only the medical but also the scientific departments. His enormous prestige as the leading clinician of the English-speaking world and his unrivalled experience as a teacher and organizer at Montreal, Philadelphia and Johns Hopkins, as well as on the Continent, paved the way for loyal cooperation from all sides. Even the most conservative "don" must have felt that a master-giant of medicine had indeed come. Add to this his unfailing geniality and *bonhomie*, which won him the affection of both graduates and undergraduates from all lands, including the Orient, and one can picture the beneficial influence

exercised by him during the fifteen years of his stay at the University. I was invited one day by Sir William to accompany him around his wards at the Radcliffe Infirmary (Oxford) in the company of a few senior students. There he was, standing upright with his left hand in his trousers-pocket and the right smoothing down his long moustache (which, by the bye, he allowed to flow down in the Chinese style and not twisted up *a la Kaiser* as was then the vogue), combining humour with affected severity in the asking of questions and always insisting upon the full employment of common sense on the part of the student when examining a patient. No wonder both well and sick loved the kind professor, looked eagerly forward to his next visit, and in after-life remembered his cheerful words after all else had been forgotten.

In August, 1913, came the great International Congress of Medicine, attended by seven thousand physicians from every part of the world. Sir Thomas Barlow was the President and Sir William Osler one of the Vice-Presidents. I attended as the principal Chinese Government representative and along with about twenty other delegates was asked to make a speech of welcome at the opening session. It was a hot morning, and almost every one had prepared a set speech. The Albert Hall was large and rather noisy with its ten thousand occupants; the platform was situated in one corner of the huge building. Only the speech of Sir Edward Grey (then Secretary of State for Foreign Affairs) was heard, though indistinctly. Next came the formal addresses from the foreign delegates. The first man took half an hour, the second twenty-four minutes, the third eighteen minutes, and soon impatience was shown by the audience. But the delegates seemed unwilling or unable to cut down their speeches. More noise, coughing and impatience. Then came my turn. "China thanks you," I said, and sat down. The ovation I received was the biggest in my life. In fact the cheering lasted four times as long as my speech. The other speakers who followed took the hint, and so only half an hour more was consumed before the morning's programme terminated. Osler was the first to burst in upon me. He seized my hand and offered his heartiest congratulations. "You are a capital psychologist," were his words.

Two evenings afterwards, Osler was host to a party of twenty-four foreign guests at a dinner at the Royal Societies' Club. At least a dozen nationalities were represented, and I

found myself in the company of Ehrlich, Hata, Abderhalden and others. None of the numerous parties that were held during that memorable week could have been more enjoyable than ours, and certainly no host was more entertaining or more considerate toward the majority of strangers assembled. Next year the War came, and because of his added duties and family anxiety no further correspondence passed between us.

If I may conclude my estimate of Sir William Osler in one sentence, it is this: "He was a great man, a unique teacher, a complete physician, a fine judge, a lovable friend, an accurate historian and an unrivalled conversationalist."

SIR WILLIAM OSLER AND THE AMERICAN MEDICAL OFFICER*

Brig.-General Francis A. Winter, M.C., U.S. Army

Washington, D.C.

ALL England abounded in hospitality for the American cousin during the summer of 1918. My duties placed me there, and I saw that the spirit of welcome made no specifications of rank. To the medical officer, the great centers of medical thought and teaching in London, Leeds, and other cities held forth the unending invitation, but there remained one host embodying within himself a whole medical center, and Sir William Osler furnished the attraction and the recompense.

The door of the lovely home at Oxford had no latchstring—it was simply perennially open to the American medical officer stationed in England, or transiently stopping there.

There was motive a plenty in going to Oxford to see the leader, but a newer and a stronger impulse to go again came to him who went once, in the welcome which he found and the inspiration and uplift he carried away. It was the easier to love one's kind, and make the necessary sacrifice for them, when one had sat in the warm glow of the fine spirit, which enveloped the listener, with the amiable and instructive counsel and good fellowship of his kindly heart and keen mind.

*Reprinted by permission from Contributions to Medical and Biological Research, Osler Anniversary Volume, P. B. Hoeber, New York, 1919.

It was a rare privilege to be able to go to Oxford as Oxford, but to go there and be met by the living sage, to induct one into the atmosphere of the sages gone before, was to do a thing marking a red-letter day.

But the gentle sage did not rest satisfied that he should do no seeking, and straightway he came to all our hospitals, whether to speak to a local clinical meeting, to raise an American flag, or look over the state of our sick, and I doubt that he ever in any degree realized the response his inspiring presence evoked in the hearts of the elders and the youngsters who sat in it. Who of those men were not his disciples, for who had not read the fascinating pages of his cornerstone of modern medical practise?

Our good Sir William—for we Americans cannot forego our partnership in him—lent all that was at his command to the advancement of American interests in England, and how he helped us is a grateful and a delightful recollection of those of us whose military fortunes were cast in the mother country during the period of the war. The whole world of medicine lays its tribute at his feet, and from no element in that broad concourse is the tribute more instinct with love and admiration than in the little offering made by us of the A. E. F. in England.

REMINISCENCE

R. TAIT MCKENZIE

Philadelphia

OSLER had that hunger for, and appreciation of accurate observation that the scientist shares with the artist. With the artist he also shared an insatiable curiosity about life. The autopsy room was often his studio and his reports couched in lucid English were the sketches that became the groundwork for textbooks and essays that take their place as works of art.

Above all he loved his fellow craftsmen whether, in the field of medicine or in the bypaths of literature or art that have proved so alluring to many of us.

Early in 1919 he wrote in answer to something I had sent him, "Just what I wanted, many thanks. It will go in my Bibliotheca Literaria. Now do something else. Jot down for me the names of doctors you know who have attained some measure of

success in art. Of course I know Seymour Hayden, and Thomson, and one or two others, but in France, Germany and Italy there must be others. Any in the United States?"Among other things unearthed in response to this request was Trueman Bartlett's "Life of William Rimmer" the New England doctor whose genius, akin to that of William Blake, never flowered as it would have done in a more sympathetic atmosphere.

The book went to him with that keen joy that one feels in sharing something rare and precious with an understanding friend, but alas! The book of his own life was in the last chapter and its volume closed before the scanty and decreasing leisure of the last broken months gave him a chance to enjoy it.

IMPROMPTU IN A LIBRARY

EDWARD CLARK STREETER

Boston, Mass.

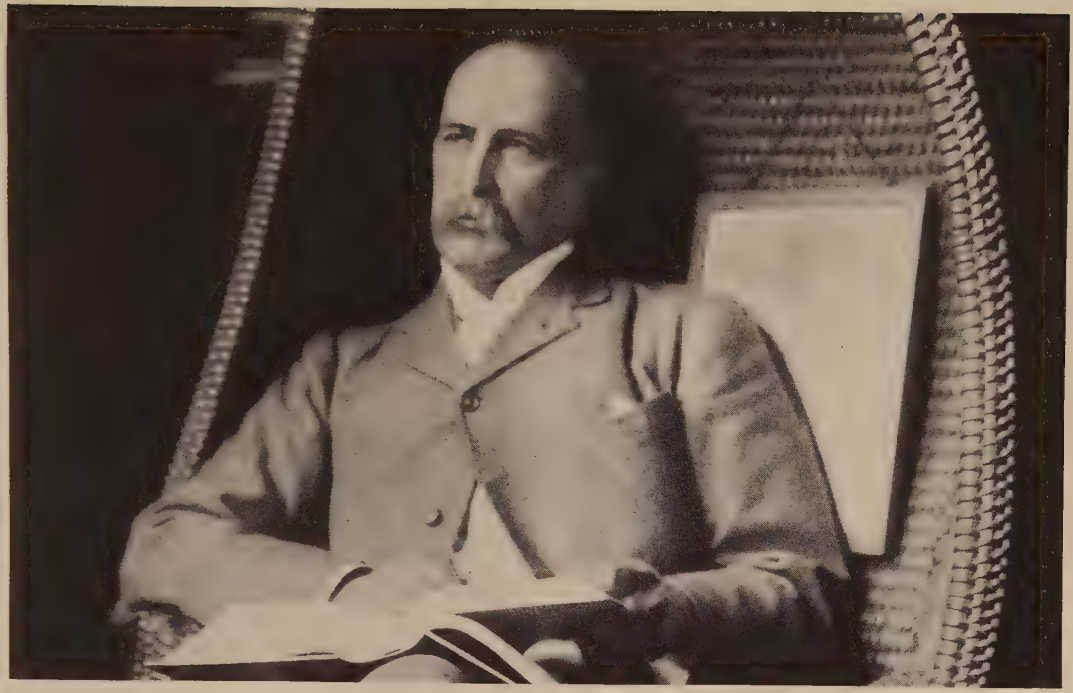
"YOU scoundrel, you scathless and complete villain, you unmitigated—How did you come by this?" The Chief was glaring from over the top edges of the little volume in his hand.

"I got it at the sale of Lord Amherst's library."

"Precisely." A pause, then with access of mock wrath. "Unfeeling, remorseless one. Just *how* did you bag it? Will you explain?"

Tyrunculus attempted a reply—something about forwarding a bid through usual channels. Sir William did not hear. "Refined villainy," he mused, "a '*tour de force*' of crookedness! I think I see the professional hand here,—a very enterprising purloining hand. It robbed me of a precious half-day. Do you know, young customer, I should hardly care to meet you at a sale on a dark night; so sure I should miss something after the contact."

As Tyrunculus watched that swarthy face he saw the mood of assumed anger shade into another. "I am trying to be civil enough," continued the Chief, "to say that you doubtless appreciate the jewel that you have in this little book, but how do I know? Mind if I tap your brains, dear fellow? Quite right! there is no gainsaying that—it is the earliest academic treatise of syphilis we have. And Leonicenus, as you say, the old boy of



WILLIAM OSLER IN THE CHAIR OF WILLIAM JENNER

Taken in the Natural History Museum at Oxford, in August, 1912, by

JOHN G. CLARK OF PHILADELPHIA

Erratum.—The above should read William Osler in the Chair of Edward Jenner.

Ferrara, a very Prince of scholars! Ariosto called him "wisest of the old, that inexhaustible ark of Science." Have you ever thought how slim-waisted and lean is our scholarship as compared with theirs—before printing, I mean, when men took on knowledge in bulk and built up an over-freight of mind? This Leonicenus bulks with the best of them, he had a noble barge of a mind, just built for the carrying trade."

Sir William had closed the book and was examining in detail the fillet borders and fleurons of the binding. "Straight-grained red Russia, bound by Kalthoeber, with his ticket inside no doubt, —a typical eighteenth century English binding; a vesture in harmony with the substance within. I happen to know this particular copy very well indeed. Truth is I fully meant to take this book unto myself. It was the only item in the Amherst lot that interested me. I lost it by a horrid mischance. Someone whom I knew took the seat beside me just as the bidding got under way, I turned from him to bid—the book had gone, knocked down to an "outside buyer" (meaning you of the melanotic heart). Undone by a salutation! I've resolved now to have done with friendly greetings—a horror, away with them! I went back to Oxford discomfited—a broken man—not so much so perhaps, pursewise, as if I had secured the book. Young man, I should like to flash before your view a picture of bereavement—of an old man returning unbooked to his den, his bones grinding together with rage and resentment, but I have made you uncomfortable enough already. Don't let me worry you. Remember the Lord tempers his winds for the shorn lambs. I soon had the offer of another copy of the book, from Milan, I believe. Was it not in Milan that the second edition appeared, about a month later than the first?"

Tyrunculus searched the pile of odd sizes stacked before him on the table. He produced the second edition. Pride of possession dwindled as he caught the glint of excitement in the eye of the mighty book-hunter. Yet he felt sure that he had made a palpable hit.

"Good," exclaimed the Chief. "so this is your brave line today, is it? All the labors of the old Vicentine. Admirable! Put them over here where I can see them. I own that I have a great weakness for the old owl. How did you know it?"

"I didn't," said Tyrunculus, "I thought"—

"Thought rightly, if you had any thought of pleasing me. I assure you Leonicenus and I have been on close terms for years: he is one of the best friends I have among the older humanists."

He went on to say that a good life of Leonicenus was much needed, that Vitaliani's account missed all the "felicities," the Buddha-like calm of the old scholar's life and the Promethean energy which he put into his work. Worse than that, it missed the import of his teaching, for Vitaliani was not a medical man and could not hope to follow the implications of that tutelary genius in the terrain of medicine. He must treat him as a grammarian, historian, translator, textual critic, an elegant Latinist well versed in *Obliquos dialecticae gyros.* He could not appraise the Vicentine's achievements in medicine at their true worth so he wisely left this phase of his subject unstudied, if not unregarded. Truly a matter beyond the range of a lawyer bitten with antiquity and with a tincture of old letters! Who then, at good distance from the grave, unhurriedly will undertake to rewrite this life? Its preparation would call for a long recess from other tasks, laborious research in archives and all that. Yes, a deal of "penitential" reading, high and arduous hours seeking *sortes*, running down references—just the thing to develop one's staying-power and technique of accuracy. But what a rich initiation into the Great Past of medicine and what a foretaste of all that we now look upon as modern in medicine, as we study Leonicenus in the clarity and true course of his thought! "Wisest of the old," a man who attained the 'Galenical' age of a nearly a hundred, without trace of decrepitude, who taught for sixty years at Ferrara *magno studiosorum concursu*, a great and celebrated pedagogue, who possessed a secret which all men would like to learn; a special way of appealing to the heart, head and imagination of the young.

Sir William confessed that he had been moved "more than once, when the Moon was in motion from the Meridian" to make "an attempt upon the life of Leonicenus." He was immensely drawn to the undertaking, could not shake himself free from the thought of it. He had assailed the "Opera omnia" (in the Basle edition of 1532) shortly after completing his sketch of Linacre.

"There is a parallel between the lives of this Englishman and this Italian more strict than any you will find in Amyot's Plutarch." Equally proficient in Greek studies, their common

purpose was to make Aristotle and Galen accessible by means of translations to scholars in general.

The Galenical texts were so riddled with errors that, in the judgment of many of the wise, the author's meaning was not to be rescued alive. But Leonicenus and Linacre were heaven-appointed healers of sick codices. They would not agree to let truth die. Today "*les hommes doctes*" are still reading the partial versions which these two restorers made amid difficulties inconceivable. Unimpeachable and immortal versions they were (though Linacre's style was a shade too severe), the admiration and envy of Erasmus, of Aldus, Budaeus, Fuchs, Copus and Melanchthon. These fresh renderings of the Pergamene brought the travailing Renaissance to its feet standing.

"There was nothing anachronistic in the talents of either of these men, but on the whole Leonicenus was a bolder innovator than his junior. In middle life he declared war against the Arabians. At seventy he launched an attack on "our Pliny," the infallible oracle, whose rude periods summed up the wisdom of the ancient world. At eighty he resolved that the issue of his teaching should be the reorganization of the study of nature. At ninety odd he began a translation of the whole of Galen. Life has no weapons against such a man. Eternally young, keen as a charioteer, he held such claims over the mind of youth as to *force* it to follow his deep-brained work. He cleared the ground for a smashing advance in the basic sciences of medicine. Particularly in botany. It then became the function of the German "Fathers of Botany" to move forward step by step and consolidate his gains. He overthrew the authority of Pliny and others of greater note. It became the function of Peter Ramus to overthrow Aristotle. Leonicenus, advanced in years, had fathered the New Criticism. He took all the hazards, not as a timid endorser of that movement (which brought Ramus to his death) but as founder and fountain-head. The virile old man took a leap, not in the dark, but into the intolerant brightness, the ineffable glory of the new day."

The Chief pushed back his chair to go. He rose, then, bending again over the volumes on the table, he picked up the "Errors of Pliny".

He appeared to weigh it, unopened on his palm. "Stript of its binding, about two ounces; of magical black letters take two

ounces, of the purest efficacy, and you have a purge for the windiest crudities that ever beset the body of medicine. This potent world-shaking little text, so thin, so light in the hand, acted as a powerful corrective in yet another way. It uncramped the posture of the mind, the mediaeval posture, confined to terms, forms, processes of thought imposed by authority. It slew the syllogism, the noisome quibble and other things of an ill-habit. It made mind regnant."

He was standing beside T. with his hand on the young man's shoulder. "If the scientific impulse has found firm lodgment, by any chance, in you and me, it might become us to show a little gratitude to the old man. What do you think about it?" With that he was gone.

A VISIT WITH DOCTOR OSLER IN OXFORD

WALTER L. BIERRING, M.D., HON. M.R.C.P. ED.

Des Moines, Iowa

FROM my "Notes by the Wayside" a few leaves are taken to recall a happy day spent with Sir William Osler at his home in dear old Oxford. It was one of the later days in the month of July, 1919, at a time when all England is beautiful with its green hillsides, fields of hops and grain, picturesque ivy-covered houses, and enclosed English gardens, forming such an interesting landscape that the two hours ride from London to Oxford passed very quickly.

My traveling companion, Colonel Louis A. LaGarde, and I arrived in Oxford at the luncheon hour. Lady Osler was at the station with her car. There were two other visitors, Colonel and Mrs. R. P. Strong; in civil life Colonel Strong was Professor of Tropical Medicine at Harvard Medical School.

We were soon at No. 13 Norham Gardens. Dr. Osler met us on the veranda with a greeting such as only he could give. He might be Sir William to others, but he was still the same Doctor Osler as we knew him in the good days before he came to Oxford in 1905. We were aware that the medical world had taken notice some two weeks before of his seventieth birthday, for on this happy occasion Sir Clifford Allbutt with his more than eighty

years had made some jocular reference to his youthful colleague. We too could testify that age had dealt kindly with him. Although the black mustache had changed to gray, the last fifteen years seemed to have passed unnoticed. In the oldtime twinkle of the eye, the winning smile and elastic boyish-like activity, we saw the Doctor Osler as his American friends had always known him. As Colonel LaGarde and Sir William were born in the same year, there was much of banter and compliment in regard to youthful appearance and the like in the greeting of these two old friends.

In his many inquiries about American colleagues, one appreciated how he still entertained the warmest sympathies for America and her institutions, associated as they were no doubt, with some of his happiest memories. One of his first questions was "How is my old friend, Priestley?", "Tell him I have just picked up several fine old works of his ancestor, Joseph Priestley". He was interested to learn that the two grandsons of his friend, Doctor Priestley, had entered the University of Pennsylvania where their distinguished ancestor was associated with the first medical faculty.

We marveled at his memory and knowledge of details of the various happenings in medical circles in America. He seemed to know so much about old friends and the service that each had rendered during the war period. Many had called on him, for Oxford had evidently been the Mecca for Americans during the previous five years. Lady Osler informed us that her maid had kept a record of the visiting Americans to whom tea had been served during the above period, and the number was over sixteen hundred.

Two special hospitals for cardio-vascular diseases and orthopedic conditions were established in Oxford during the war, where a large number of American medical officers were stationed from time to time. Lady Osler referred to the great pleasure it gave Sir William to have these fine young men about him. We all remember his particular affection for the younger members of the profession. The medical officers who were so fortunate in being associated in service with Doctor Osler will no doubt always treasure the memory of this experience.

Sir William was looking forward with interest and pleasure to meeting his many American friends the following year at the

annual session of the American Medical Association in New Orleans.

After luncheon we wandered about the beautiful garden and the interesting home with its treasure store of books; later saw a bit of the University that to most of us means Oxford. There is particular charm about Christ Church, Merton, Magdalen, Pembroke, Balliol, Queens, University, Oriel and the other colleges that form the University of Oxford; some of them are mellow with age, while others belong to the newer group, but about all there cluster many interesting traditions of leading personages in English history. Knowing his fine cultural instincts and love for old books, one could readily see why Doctor Osler found the new environment so attractive.

Although he had to assume many new duties during the war period, his interests and sympathies continued to be directed in promoting the highest ideals in medicine. His deep interest in the purpose of our visit can serve as one such example.

For a long time the idea had been in the minds of the leading clinicians and medical educators in the United States, that the best means to elevate the standards of medical practice was to develop, of national scope, a central qualifying board, expressive of the highest type of medical training in our country. As an outgrowth of this sentiment, the National Board of Medical Examiners was established in 1915.

With the close of the World War the time seemed opportune to have a committee of the Board make a comparative study of qualifying examinations as conducted by the Royal College of Surgeons, the Conjoint Board of England, and the Triple Qualification Board of Scotland. The further object of the mission was to acquaint these bodies with the aims and purposes of the National Board, with a view of bringing about some form of reciprocal understanding between their country and ours in matters of medical education on the basis of the examination conducted by the National Board.*

In previous correspondence Sir William had been most helpful with advice as to manner of approach and general procedure, and on this day expressed gratification over the favorable impres-

*The Committee consisted of Colonel L. A. LaGarde, Colonel Victor C. Vaughan, and the writer. Colonel Vaughan was detained at home by reason of the death of his son, which occurred just before sailing.

sion that our mission had evidently accomplished. The committee had decided to include in its report a recommendation that the National Board extend an official invitation for a British Commission (of three members) representing the qualifying bodies of England and Scotland, to come to the United States during the following year for a study of our leading medical schools and teaching hospitals, and to attend a National Board examination in Philadelphia. The advice of Doctor Osler was again helpful in selecting the personnel of this proposed Commission, and with his approval the following names were submitted: Sir Humphry Rolleston of the Royal College of Physicians, Sir Holburt J. Waring of the Royal College of Surgeons, representing the Conjoint Board of England, and Sir Norman Walker of Edinburgh as the representative of the Triple Board of Scotland.

Sir William was most encouraging in his prophesies as to the outcome of these mutual visits, recognizing their far reaching importance, not alone in forecasting still further exchange of professional relations between the two English-speaking nations, but in advancing the higher ideals of world peace and human welfare.*

Our Committee had made a rather extensive investigation of the opportunites for post-graduate study in England and France, particularly in London. Here again we recognized the leadership of Sir William, for he seemed to have early appreciated the necessity of co-ordinating the graduate work in London and Paris in order to keep American physicians from again going to Berlin or Vienna for this purpose. For the first time a definite plan for post-graduate medical education had been accomplished by a union of all the undergraduate medical schools, existing post-graduate schools and special hospitals of London, which would permit American and foreign physicians to avail themselves of the unusual clinical material afforded by post-graduate courses in London. This plan was referred to as the Osler scheme, and Sir William was the Chairman of the Executive Committee in charge of this new institution.

*The British Commission upon their return in 1920 rendered a report to the Conjoint Board of England and the Triple Board of Scotland that the educational methods in the United States and the National Board examination were satisfying, and recommended that the diplomates of the National Board be admitted to the finals of the two British qualification Boards and similar action was taken by the National Board with reference to certificates from the two qualifying Boards mentioned, thus establishing for the first time a reciprocal agreement in matters of medical education between the two countries.

Sir William and Lady Osler were making ready to leave the next day for the Isle of Jersey, their summer home. This had been a summer of peace and victory celebrations in England, and the first opportunity for relief from the great strain in five years.

The war had brought the keenest sorrow to the Osler home in the loss of an only son. This did not find expression in words, although it was in the thoughts of all that day.

It was this quiet heroism in the aftermath of the great war, reflected in so many English homes, that more than all else engendered a stimulating hope for the future of this sturdy race.

The hour had come to say adieu. There was that in the words at parting "Mighty glad that you boys came out", and in the final wave of the hand, that left a delightful impression of our visit to Oxford.

GLIMPSES OF OSLER DURING THE WAR

Henry R. Viets, M. D.

Boston, Mass.

IN the heart of Oxford there stands one of the finest of the Radcliffe memorials, the Radcliffe Infirmary. A small hospital of old vine-covered buildings and spacious gardens recently modernized by newer structures containing laboratories and offices of administration, the whole standing as a perfect unit for a moderate sized town. Sir William's touch is everywhere seen, in the wards, in the laboratory and in the pathological building. It is a Twentieth Century hospital builded on a secure Seventeenth Century foundation.

If you stood at the door of this hospital on a Sunday morning and looked up the Woodstock Road at precisely ten o'clock you would see Sir William round the corner with his quick energetic step, coat-tails flying, yellow gloves flapping from his hand held in one trousers pocket, cane swinging on the other arm, head erect, eyes thoughtful but brilliant, observing all as he passed. A wave of the hand to an old friend, a word with a neighbour over the garden wall, a pat and a witticism for a child, and quickly he had passed down the street. When he reached your side, a hearty handshake, a pleasant word and, with arm on your shoulder, he would enter the hospital. Then a round of the wards,

a compliment to the nurse, a joke to the house-surgeon, a sympathetic touch for the sick and a bedside clinic for ten minutes, running the whole historical gamut of pernicious anaemia from the first reported cases to the special aspect of the case before him. After an hour in the wards you would follow him to the pathological building, in his opinion the very heart of the hospital, where the specimens of the past week were examined and correlated with the clinical pictures so well remembered from the week before. The end of the morning always came in the garden with Sir William the centre of the group, talking on all the aspects of the cases seen, with characteristic vivacity, enthusiasm and profundity.

The hospital was made, in Osler's time, the centre of medical life in Oxford. He would see a case or autopsy of special interest there and then throw himself into that problem until it was covered in all its aspects. Then came a symposium at the Radcliffe a few weeks later, at which he showed the case or specimens, gave other illustrative cases from his vast experience, reviewed the subject historically, noted the modern literature and spoke of the treatment, often ending with a plea for more autopsies and the preservation of carefully described specimens in qualified museums. Such a brilliant symposium, for instance, occured in March 1915 on, "Arterio-Venous Aneurysm," a most comprehensive talk, published in the Lancet for May 8th, of that year. This was only one of the many that came from his pen during those frightful four years of war.

In spite of the terrible personal strain of the War, he never for a moment turned aside from his love of medical history. One day in September 1916 I had occasion to relate to him the story of an excursion I had taken the day before to the little village of Fenny Stratford, north of Oxford, in search of information about Thomas Willis. After listening with the greatest interest, he at once planned a trip to this village on St. Martin's Day, the 14th of November, to attend the yearly patronal festival for Thomas Willis. I wrote, later, to Dr. Bradbrooke of Fenny Stratford and, of course, the whole affair ended in Sir William becoming the orator of the day (*Vide,—Annals Med. Hist.*, 1917. I. 118). We went up together at the appointed time and I have never seen him enjoy a lark so much. He had all the enthusiasm of a boy and fairly carried the Fenny Stratfordians off their feet. Instead of an old staid professor from the ancient University they met

a man who combined all the finest qualities of youth, both mentally and physically, with profound knowledge and the graceful dignity of his honorable office. He told me on the train coming home that it was one of the pleasantest days of the War, the first day in months that he had been able to throw off the constant strain.

Sir William traveled to many military hospitals in his capacity as consultant during the summer of 1916, when I saw most of him. In spite of the restriction of the use of petrol he was able to retain his car and use it for official visits. Very often it was two days a week, all day trips, of a most strenous character. Promptly at nine he would leave the house, in a not unbecoming uniform, his arms loaded with letters and books to read on the way. There was never a minute lost and I have seen him look through fifty letters and five or six books or sales-catalogues while we were hurrying through the country, much of the time keeping up his end of the conversation. His arrival at a military hospital like Cliveden or Paighton was an event, and the whole staff would be out to meet him. It was always the usual rounds of the wards and a visit to the pathological laboratory; his estimate of the value of a hospital was largely based on the condition of its laboratory of pathology and its museum. This department was always the first asked for on entering a new hospital, and a visit to the pathology building was never omitted. Luncheon on these hospital trips was an important part of the program, for at such times Sir William was at his best, telling stories and anecdotes galore, his brilliant touch enlivening many a sombre mess. When America entered the War he added her hospitals in England to his already overcrowded schedule. The opening of the American Hospital at Portsmouth, with Sir William raising the flag and delivering a short address, was the finest start such an institution could have. His presence on that day drew many distinguished men from the surrounding community to welcome and honour him, but his heart was with the wounded or sick soldier, and the real Osler stood out at the bedside more clearly than in the banquet hall. The sick men loved him from the start and felt the glory of his association with them; he in turn reverenced their manliness and fortitude under conditions not of their own choosing. His touch made them better, his glance made dim eyes grow bright.

In his home he was always close to his books, for his library flowed over the house, invading the sleeping rooms and even the dining room. At dinner he often arose to reach for the handy Dictionary of National Biography to verify or augment some subject of conversation. He would suddenly jump up, capture the right volume, bring it back to his chair, and, holding the book on his knee, read the important paragraph aloud. Perhaps this would happen two or three times during dinner, for he always held that the best time to learn was when the idea sought for first came to mind. I am sure that he considered the ideal public library or museum as one never closed, where the doors would always be wide open when the inspiration came. At tea or after dinner came the delightful toss of conversation on the shaded porch, with the books always at hand for reference. His library was a library *used*, in a way I have never seen duplicated. Dust seldom collected, especially on the older books, where the masters of medicine originally described the clinical entities. In the early evenings he would slip away for a quiet hour in the library, his going being almost imperceptible, so royally entertained were we by Lady Osler. Just at the psychological moment when some important guest was leaving he would appear with a friendly word, link his arm in his guest's and escort him to the door.

In the fall he held what he called his "annual shed." To all who happened to be present fell his duplicate books, pamphlets and reprints, and a very valuable catch it often was for the youngsters in medicine in Oxford at the time. I have seen delighted students carry away a small library in their arms and many a nucleus for a private medical library has been started in this way. Sir William was never happier than on those days when he blessed some Canadian or American student as the young man left the house, with arms full of books and heart full of gratitude and love for his benefactor.

In the summer of 1919, his last summer, came what he considered one of the most important events of his life. He had been chosen the president of the Classical Association and was to accept that honourable office in Oxford. His address on that occasion has been charmingly described elsewhere (*Vide*,— Introduction by Dr. Harvey Cushing to *The Old Humanities and the New Science*. Houghton, Mifflin, Boston and New York, 1920.) His heart was always true to science and medicine,

and I remember his delight in showing to the classical scholars the collection of old scientific instruments at the Bodleian that had been gathered together for the event. He revelled in orreries, astrolabes and early microscopes; the history of this and the history of that was on his tongue's end. In the collection, the very vitals of early English science were exposed, only waiting for his interpretation. The best of the classical men in England sat at his feet that day and went away astounded at their own ignorance. The seemingly wide breach between the Classics and Science was closed after years of misconception. It was truly a fitting end to his splendid career and his audience must have made him very happy with its applause and congratulations.

SIR WILLIAM OSLER AS HOST TO AMERICANS IN ENGLAND DURING THE WAR*

GEORGE WILLIAM NORRIS, A.B., M.D.

Philadelphia

IN the autumn of 1904 a young man recently emerged from a hospital interneship, and having had the temerity to send out certain medical reprints, received the following letter:

"Thanks for your papers, with which I am greatly pleased, not only for the evidence of good work they show, but for the memory of your father and grandfather. The tuberculous endocarditis paper is most interesting and will be useful, as I have just been going over all our material on the subject. Could you not come down this winter and give us a little talk at our Laennec Society? I send you a programme and you will see the sort of work we are trying to do."

Needless to say the young man accepted, and thus first tasted Oslerian hospitality and fell under the spell of Oslerian influence.

The incident itself is of interest only in that it exemplifies what was happening to other young physicians in other cities. The mere fact that someone did read reprints, and especially

* Read at the Osler Memorial Meeting, College of Physicians, of Philadelphia, March 3rd, 1920. Reprinted from the *American Journal of the Medical Sciences*, 1920, clix, 630.

that no less a man than Osler himself had shown a personal interest in one's efforts, was a stimulus as effective as it was widespread. Is it any wonder that Osler's death is so strongly felt as a *personal* loss by so large a part of our medical profession. And is it any wonder, on the other hand, that Osler could do and did so much during the great war in having the young Americans and Canadians who went to England assigned to duties and positions best suited to their abilities?

In May, 1917, when the first American Base Hospitals arrived in England, among the first to meet them and extend a welcoming hand was Sir William, who seemed to be everywhere: handshaking with everyone and inviting many to his home. From our first entrance into the war until long thereafter a constant and steady stream of Americans flowed to Oxford. From hundreds one heard in France of their delightful welcome there.

Nor must we think that such hospitality was extended only to friends and persons of distinction. There were probably no men in the whole American service so lonely, lost and forgotten as that lot of unattached medical officers, upward of one thousand in number, who were sent overseas in the early days, attached to British battalions, and as reward for their prompt patriotism, denied consideration as well as promotion by our War Department. Many of these men were welcomed at Oxford, although for the most part they were entire strangers to Sir William in both name and reputation.

Those who again visited Sir William after the Armistice, after the death of his son, were amazed to see with what an unconquerable spirit he met his awful loss. There was the same self-effacing kindness and sacrifice, the same hospitality and farewell dinners even for those about to return home—dinners graced by men of international repute, because Sir William was the host.

Of the hospitality meted out at 13 Norham Gardens it is difficult to speak. One did not have to be told one was welcome—one somehow felt it. It was indeed a place where, as related in the old Norse Saga of Frithiof, "Hospitality sat in gladness." She strained not, but pervaded all things. Whether one wandered in the gardens with Lady Osler, who wistfully showed one her pet flower-beds ploughed up to grow potatoes;

whether one visited the military hospital or dined at old Christ Church College with Sir William; or whether of an evening one sat at ease before the open fire in the library, while being shown the treasured tomes that Osler knew and loved so well, it mattered not. The evenings passed quickly amid reminiscence, anecdote, flashes of wit and twinkles from those deep-set eyes; while questions were asked about those at home whom he had long not seen.

Advice and assistance were yours for the asking. Often indeed one heard: "You must see such and such a hospital; I will give you a letter." "Don't fail to visit ———; a splendid fellow; tell him I sent you." "If you want anything when in France drop me a line." "I was interested in your article on so and so and shall refer to it in my next edition." "You must read X, published in 1640; he was quite wonderful. But little of real importance has been added since."

Charming, always interesting and interested; always giving in full measure of himself and of his time; always brave and smiling, and with an only son in France in the heavy artillery. A son so much beloved that it is with much hesitancy and only in profound reverence I speak of an almost sacred incident.

It was long past bedtime; we were about to "turn in" and had lit our bed-room candles, when the cheery, well-known voice from the hallway called us back. "Do you mind? I should like to show you Revere's room?"

There it was, untenanted, but just as its occupant had left it. "You must see some of his books. Are not these gems? These old editions of English classics which he has picked up. I hear from him every week."

The quiet room in the sleepy town, the flickering candles, the musty volumes, the devoted father—it was a picture seen through an atmosphere of the teeth-gritting tenseness which pervaded the whole of England at that time; and with a background of that Hell that was being enacted across the Channel—a picture that will not be forgotten.

And it was not long afterward we learned that the dreaded blow had fallen, and that Revere, too, now slept in "Flander's Fields!"

SIR WILLIAM OSLER—PHYSICIAN AND PHILANTHROPIST—GLIMPSES DURING THE WORLD WAR*

EDGAR LORRINGTON GILCREEST, M.D.

University of California, San Francisco

DECEMBER of 1925 will be the sixth anniversary of the death of Sir William Osler. It will also be the sixth anniversary of the gift by John D. Rockefeller of fifty million dollars to a fund for medical research, which gift swelled his total contributions to medical science to three hundred million dollars. Because of these contributions, James Harvey Robinson has placed Mr. Rockefeller among the seven greatest Americans, on the ground that through his donations to medical science he has accomplished more for the human race than any other man on this continent. Now, part of the credit and the glory of this great achievement belongs to Osler, for he, too, shared in stimulating Rockefeller's interest in medicine. Through him education "turned the eye of the soul towards the light." Whatever additional account, therefore, can be given of this man who, in a crowded career, performed such service incidentally should be illuminating.

It was my good fortune to have come in rather close contact with Sir William Osler in 1915 during the World War. He was consultant to the American Women's War Hospital in Paignton, South Devonshire, England, where I was serving as an American Red Cross Surgeon, and during his visits to this section, which would sometimes last a week, he would have luncheon with us every day after his hospital rounds. At these luncheons Dr. Osler's conversation was always sparkling and brilliant and full of humour. It became my custom to jot down in my diary much of what he said. And I retain vivid impressions of him at his work.

As he made his tour through the hospital he generated

*Address delivered by invitation at the annual dinner of the King County Medical Society in Seattle, Washington, March, 1925.

everywhere a spirit of warm friendship. He shook hands with all the physicians and nurses as he came to them, not overlooking the probationers. To those across the ward he waved a friendly greeting. When one of the nurses asked him to let her take his photograph, he grasped the arms of two of the physicians, saying: "Well, but I must have the boys with me." A few moments afterward the nurse, watching her opportunity, snapped him by himself. When he heard the click of the camera he looked up in surprise and exclaimed, smiling: "Oh! you thief." As he met the secretary of the hospital, a very quiet and demure English woman, he asked her if she were being treated as well as she deserved. She blushed and replied that she thought she was. Whereupon Sir William with a twinkle in his eye, added: "Well, if you are not, just let me know and I shall see that your treatment reaches that standard." In all this there was modesty, good-nature and a shining spirit of justice.

As we made our way through the wards I showed him eight patients with gun-shot wounds of the chest. He examined them carefully and dictated a note on each and then remarked to me: "Turn them over to Dr. Rest and Father Time, and with the assistance of the nurses and the culinary department they will soon come around."

Evenings in the drawing room of the hospital he would frequently talk to us by the hour on the history of medicine. We would listen thrilled by the story of his discovery of a first edition or a rare volume in some old book shop somewhere at some time. No one studied and revered the lives of the fathers of medicine more than Osler. He himself had said: "In the continual remembrance of a glorious past individuals and nations find their noblest inspiration." He was an ardent bibliophile. "Books have been my delight these thirty years," he stated in his address in 1901 delivered at the opening of the Boston Medical Library, and quotes "Books delight us when prosperity sweetly smiles; they stay to comfort us when cloudy fortune frowns. They lend strength to human compacts, and without them grave judgments may not be propounded." He began early in life the collection of the masters of medicine and when he died his collection at Oxford was one of the best. This great library he bequeathed to his *alma mater*, McGill. Here also, among his books his ashes will repose. Reading in that library—his shrine—

Sir William Osler in Drawing Room, American Women's War Hospital, Paignton, South Devonshire, England—1915.

SIR WILLIAM OSLER AND STAFF
AMERICAN WOMEN'S WAR HOSPITAL, PAIGNTON, SOUTH DEVONSHIRE, ENGLAND

From left to right standing: Dr. J. L. Stowers, Dr. W. T. Fitzsimmons, Mr. Hosmer, and Dr. Edgar L. Gilcreest.
From left to right sitting: Dr. Robert W. Hinds, Lt.-Col. Gunning, Sir William Osler, Head Matron, and Dr. Wm. G. Crumley.

*The second man from the left in back row is Dr. Fitzsimmons, who was the first American killed in the A. E. F., and to whom the American Government has dedicated a hospital in Denver, known as the William Fitzsimmons Memorial Hospital.

what student can fail to be influenced as he turns the pages of these priceless treasures and considers the labour of love expressed in their acquisition.

I recall so well his remark one day when I showed him Dr. John Wyeth's autobiography, "With Sabre and Scalpel." He quickly grasped the book and turned its pages with enthusiasm and avidity. In a few moments he came to a short poem which Wyeth had composed and with a pleasing smile exclaimed: "Well, my old friend Wyeth writing poetry! I might have known this for he is a true Southerner. Let's hear what you Southern fellows have up your sleeves."

It was characteristic of him to give credit to others. One afternoon as we were visiting the wards and perusing some histories, I remarked to him about the good feeling that existed among the medical schools and the physicians in Baltimore, which I noted on a recent visit there. "Yes," he said, "Welch is responsible for that." Yet it is well known that Dr. Osler shared equally with Dr. Welch in this achievement and that in recognition of his share and of the esteem in which he was held in Baltimore, the Maryland Library of the Medical and Chirurgical Faculty dedicated a hall to Osler a few years before he died.

The stress and strain of the World War pressed heavily upon him. He was much concerned about the comforts of the old professors and their wives who had been driven out of Belgium and had taken refuge in England and were thrown on the charity of that country. He kept up an active correspondence with medical men across the seas; and also with anxious parents inquiring about the fate of their sons who were sick or wounded in England. He shared the sorrows of these parents and in August, 1917, the arrow struck deep in his heart when he was brought his greatest grief in the death of his son, his only child, who was killed at the age of twenty-one, about the Ypres salient. In July, 1915, while visiting the military hospitals in France, I had seen his son who was then attached to a Canadian Base Hospital near Boulogne. Although he was not of age he was even then lending a hand. He had become, too, his father's companion, and shared his interest in medical bibliography. On being notified of his death, Dr. Osler bowed his head and said softly: "He was a good boy, a good boy!" Those who had studied under Dr. Osler years before learned with deep grief of

the death of his son. Their one remark was "Oh, the poor chief!" With the appellation "chief" went a mingled reverence and admiration. And no one was ever more worthy the title; he was "an officer equal to his office." The chief kept up his work, and when death called him he was concerned with the elaboration of a catalogue of his marvelous collection of historical texts. The death of his boy broke his heart but his resolution was unbent and he worked to the end. What Galsworthy has said of Conrad is true of Osler "If to a man's deserts is measured out the quality of his rest, he shall sleep well."

One earlier impression of Osler links up with these later glimpses. In May, 1910, in Baltimore while a student at Johns Hopkins I heard Osler, who was then on a visit to America, give a clinic on the day which happened to be the twentieth anniversary of the opening of the Johns Hopkins Medical School and his remarks on this occasion concerning the birth of the school, with its twelve students, and the principles on which it was founded and the requirements which were desired, its trials and hardships, were illuminating and deeply inspiring. He told how the canny folk—the kind whose ruling passion is fear of backing the wrong horse—shook their heads, looked mysterious and said to each other it will not work; a school with such a high standard is a work of dreamers and theorists. But Osler and his illustrious colleague, Welch, had a reverent optimism; they cast their vision beyond the horizon. Thus their determination to establish a medical school of the highest requirements was to revolutionize the teaching of medicine in North America. They lived to see their dream realized. In the days when I used to see Osler go about the wards in South Devonshire, the school had already come to be one of the great seats of medical learning of the world. Medicine in America to-day can in truth be said to be Oslerized just as literature has been Shakespearized.

Osler's claim to remembrance, I believe, rests upon four factors. He was a clinician, a teacher, a writer, and a personality. As a clinician he was unexcelled either on this continent or abroad. His unparalleled diagnostic ability rested upon an unusually careful and long training in the fundamental sciences, a natural tendency to be accurate and painstaking, the widest knowledge of his subject, frequent visits to foreign clinics and the deepest interest in his profession. The ward of the hospital had

a peculiar fascination for him and every disease was interesting and worthy of thorough study and investigation. "Osler saw," as Hare states, "in disease in the living a treasure, just as Leidy saw in every flower and stone, and bone, and worm, and rhizopod an inner beauty."

As a teacher he had no peer. He liberated the American medical student from the dull didactic lecture of the class room and took him to the bedside of the patient in the wards where he could study and observe diseases in all their phases. To-day the student assumes lightly that medical education has always been thus but he has only to ask his grandfather or perhaps his father, if they be doctors, about medical education in their time to realize what a revolution in teaching this was and what an everlasting debt of gratitude he owes to this great physician. How Osler in this way revolutionized the teaching of medicine on this continent makes one of the most brilliant chapters in medical history and is in part responsible for the high respect which American medicine enjoys to-day in the eyes of the scientific world. Osler loved to teach. "Students," he said, "were the inspiration of my life." In one of his last addresses before leaving America in 1905 to accept the Regius Professorship of Medicine at Oxford, he said: "I desire no other epitaph than the statement that I taught medical students in the wards." His advice to students was taken, he said, from the Sermon on the Mount: "Take, therefore, no thought for the morrow; for the morrow shall take thought for the things of itself." Put the best that is in you in to-day's work! He did more to mould the character and affect the destinies of the men who studied under him—ever "motivating them to high ideals"—than, perhaps any teacher of his time. He impressed upon them never to confuse deals with ideals. As Brown observed: "the more we learned, the more wonderful his boundless knowledge seemed; the wider our vision, the more limitless his appeared." He planted in the minds of the students a love for the literature of the profession, as well as for the most beautiful in general literature. As Hare states: "He taught us culture, and that the wearied mind could find comfort, sustenance and inspiration in paths wherein we had not trod in this workaday world." Those he taught were stimulated by their association with him and went forth to the corners of the earth with a new outlook on

life. His influence had left a deep and lasting impression on them. "With influence there is life, without it there is none."

Numerous examples could be cited of the personal and human touch of this great physician on the student, or group of students—a touch which seemed to reach out and grip the inner man. I shall relate only one. A medical student of Oxford told me that he was walking down the street one morning when Sir William passed in his carriage. As soon as he saw the student he stopped his carriage and telling the driver to wait he walked up to the student greeting him with a hearty "Good morning." Then arm in arm he walked with him for a few minutes. He asked the student: "Well, what did you read last night?" The student replied: "I read Graves' disease." "You did," said Sir William, adding: "That is interesting. Now the latest contributions to this subject are as follows. . .," and then he told him from memory the names of men in different parts of the world who were particularly interested in this subject and were writing on it. Just before returning to his carriage, Sir William asked the student: "What are you going to do next Saturday evening?" "Nothing in particular," answered the student. "Then suppose you come to my house for dinner." The next Saturday the student went and found a number of fellow students there and he told me afterwards that Sir William and Lady Osler gave them a "jolly good dinner." After dinner they chatted and smoked in the drawing room and a few moments later returned to the dining room. In the interval the table had been cleared. Sir William brought into the room an arm full of rare editions and going to the end of the table spent some time showing and explaining these old books to the students. Afterwards he consumed perhaps an hour telling them about the life and contributions of Sydenham, one of the masters of medicine. What physicians to-day, now enjoying a professoriate or a prominent place in their community, do not vividly recall with much pride when they were students under Osler in the Universities of McGill, Pennsylvania, Johns Hopkins or Oxford a similar friendly greeting or such an evening at the "Chief's" house.

His influence was not restricted to his students alone but he had a genuine interest in and felt a definite responsibility for the welfare of the community in which he lived. When typhoid

fever was prevalent in this country and was filling the wards of our hospitals and taking such a large toll in death, it was Osler, asserts Hiram Woods, who in an address, said: "Typhoid fever, the monster that destroys the best of our sons and claims the fairest of our daughters; are we to let it continue or stop it?" Then Osler outlined the preventing measures to control this devastating disease. Even before vaccine treatment was developed these measures had reduced the scourge of typhoid fever, and to-day together with vaccination have made it a rare disease.

As a writer his works rank with the best in any language. His "The Principles of the Practice of Medicine," he lived to see accepted the world over and translated into many languages. Although he stated once that "even great textbooks die like their authors," I believe that this *magnum opus* will stand as an enduring monument to his ability to put into one volume the best knowledge of his time on the science and practice of medicine. Of all the books written on medicine, if I were to be limited to one, I should without question immediately choose this one. He possessed that singular power to convey his thoughts with directness and lucidity which leaves no doubt in the reader's mind as to his meaning. He was as familiar with the classics as Ruskin was with the Bible and never had to skirmish for an apt quotation to bring his point more forcibly home. His delicate sense of humour made his writings fascinating without detracting from their impressiveness. That the writings reveal the man was never truer than with Osler. Even his energy shows in them. His contributions to science include in all the colossal list of over 770 articles and books. He felt that it was the duty of every medical man to contribute as far as in him lay to the progress of medicine. He said: "We are here not to get all we can out of life for ourselves but to try to make the lives of others happier." In this respect he was a bridge builder ever trying to make the way easier for those who were to follow. Miss Noyes, the Librarian, asserts that: "No one man so left his imprint on the libraries of two continents as has Sir William Osler."

Time and time alone gives the necessary perspective for the true appreciation and evaluation of greatness. Emerson says: "You cannot see the mountain near." Osler's name will not

rest on any discoveries he, himself, made in the laboratory, but rather on his studies and observations in gross pathology—that is to say, his observations of changes found in the dead and the application of this knowledge, together with the laboratory investigations in the treatment of the living. All the knowledge of the combined sciences he brought to the bedside of the patient in his attempt to arrive at a diagnosis. His life work, therefore, was essentially in the ward with sick patients—in the real laboratory of humanity, with disease ever before him and its eradication his paramount desire. He was a clinician first, last and all the time and there never was a better one. It has often been said that flowers grow best in the garden of him who loves them. Osler's success was due to his love for humanity and his one aspiration from his advent into medicine was to be a physician in the largest and purest sense of the word. Fidelity to profession and purpose was never better exemplified than in Osler's life. Indeed, fidelity could sum up his life and work. To walk with him on his ward rounds; to see him carefully examine a patient and accurately dictate his minutest findings; to hear his words of cheer and encouragement to the afflicted; to listen to his advice and counsel to students and assistants was to realize that you were in the presence of a master—a scientist, an artist, a scholar, a humanitarian, a philosopher all in this one physician. Greatness and nobleness cannot be moulded and fashioned out of more enduring material.

Osler's abilities as a clinician, as a teacher, and as a writer would of themselves have made him famous. But this tripod of great qualities combined with a magnetic personality such as his made him easily the greatest physician the world has ever known. This is not an extravagant statement made at an unguarded moment. The more his life, his works, and his influence on medical men and on scientific medicine all over the world are studied the greater he becomes. It is, indeed, a far cry from the days of magic to microbe and many great names adorn the pages of medical history and I bow in reverence to the mention of them—from Hippocrates to Lister and Koch. But when all the component parts of Osler's greatness are brought together, the most illustrious physician in all history stands forth.

"Even in youth he possessed personal qualities," Barker

states, "which marked him as a leader." In his nature the love of science, art, literature and charity were blended in such wondrous proportions that he was destined to be an outstanding figure of his day. Osler possessed tolerance, the noblest virtue of mankind. I shall always recall him as "living more in the sunshine of life" and as having that rare and real secret to the beauty of life—the true art of living—more than any man I have ever known. This I treasure among the priceless memories of cherished associations. Although when I was with him he was three score and five, an age when many men are in "the sere and yellow leaf," he retained to a remarkable degree his mental and physical vigour. Such a delightful *raconteur* was he that it was often said of him that when he was at a dinner that no matter where the host sat, where Dr. Osler sat was the head of the table.

This domination of a dinner table was not due entirely to his power as a story teller and to his wit. His distinguished appearance contributed to it. His well chiseled features, his "truly nobly proportioned head," his expanse of forehead, his dark penetrating eyes which seemed to see more than to look and which in moments of humour mirrored merriment, his expression radiating kindness and good will, his alert, bright and hopeful countenance, his quick and graceful gesture, his indescribable charm of manner which won you immediately and held you captive thenceforth—this was Osler.

In his final address delivered in New York in May, 1905, he left us with these words: "Happiness comes to many of us in many ways, but I can truly say that to few men has happiness come in so may forms as it has come to me." His words on leaving his professorship at McGill years before are as applicable: he "left it a rich man, not in this world's goods. . . . but rich in the goods which neither rust nor moth have been able to corrupt—in treasures of friendship and good fellowship."

His house in Oxford, aptly called "The Open Arms" was in reality a Mecca for physicians from all parts of the world, and a visitor there immediately felt the warmth of Sir William and Lady Osler's genuine welcome. In fact Malloch has referred to him as the "Ambassador of North America."

If Osler's influence were traced from the time he entered medicine until he closed his eyes in his last sleep on the last

Sunday in December, 1919, it would be found to run as a deep and broad river from its source in Canada, then to the United States, and on to Great Britain. Wherever he went he carried the seeds of fresh ideas, of scientific progress and good fellowship, converted chaos into constructive thought; from these seeds sprang up large and noble trees and from them twigs have been taken and transported to the remote corners of the earth; and from these twigs vast and green forests of medical learning have grown and flourished—all pervaded and nourished by the breezes of the Oslerian spirit of scientific medicine, love of truth and lofty ideals.

The Sir William Osler here presented was the man whose book "The Principles and Practice of Medicine" attracted the attention of Mr. Rockefeller whose interest in medicine culminated in the establishment of the Rockefeller Foundation and whose contributions reached the week Osler died the colossal sum of three hundred million dollars. If these millions had not been turned into this channel for the alleviation of human suffering all over the world, inestimable, indeed, would have been the loss to the world. Thus we see how Osler's love for humanity honoured him and served the world. His high place in medical history as a physician is assured, but he should also have, and with an increasing knowledge of his work will have, a high place in the minds of all as a philanthropist.

When a man in our generation, born in Canada in her pioneer days, so shapes his life that by his innate ability, force of character and love of humanity, he affects the destinies of men all over the world, he lifts himself to a spiritual supremacy among his fellowmen that makes his life a drama of simplicity and grandeur at once appealing, fascinating and inspiring. Such a life was Sir William Osler's. In these remarks I have attempted to give you glimpses of his personal and human side—the real Osler. I hope that they may show you some of his bright philosophy, who, though engaged in serious work and accomplishing great deeds, never took life too seriously nor lost his sense of humour; and that they may cause those of you who were among his students to walk again with him upon his memorable ward-rounds and bask once more in the sunshine of his radiant personality.

RECOLLECTIONS OF SIR WILLIAM OSLER'S VISIT TO NO. 3 CANADIAN GENERAL HOSPITAL (McGILL)

Major A. C. P. Howard, C.A.M.C.

Iowa City

NEVER shall I forget my six months service at a base hospital at Dannes-Camiers, France. It was an experience of contrasts, light and shadow, work and lethargy, happiness and boredom; bright clear sunshine or rain and mud.

We had scarcely put the finishing touches to our base hospital of one thousand beds, and had only been receiving the sick and wounded a week or two, when on September 8th, 1915, our hearts were gladdened by the arrival of Sir William Osler, as our guest. He came to us in the uniform of a Lieutenant-Colonel of the R.M.C. looking as if he had been born and bred a soldier, and in his bearing many years younger and certainly more "swanky" than many of the regular officers of junior rank. He was the same kindly spirit that we had all previously worshipped in Montreal, Baltimore and Oxford. Interest and enthusiasm seemed to bubble out of him, and we all soon felt the electrifying effect of his personality. Shortly after his arrival we took him for a walk over the hills to a point of vantage, commanding the entire hospital area of Dannes-Camiers. From it could be seen the four or five hospitals grouped in the valley below. Conspicuous among these, because of the variegated colors of the large Durbar tents obtained from India, was our own hospital. Osler immediately suggested that some good artist should be induced to paint the scene. I fear this happy idea was never followed up.

At mess that night he was the life of the party and had a cheery word for every one from the colonel to the junior quartermaster, his son Revere Osler.

Next day after a formal inspection of the hospital with Colonel Birkett, he was handed over to Lieut.-Colonel John McCrae and the writer, who escorted him about the medical wards. All the interesting and obscure cases were shown him as in the old days in Baltimore, and as of yore we received his simple, concise and invaluable advice, and the patient, the cheery smile and word of encouragement.

Though interested particularly at the time in arteriovenous aneurysms, patients with trench fever, war-nephritis, paratyphoid fever and D. A. H. were examined by him with his usual uncanny insight. One case of haemo-pneumo-pericardium, I remember showing him with great pride, and I shall never forget my relief when he confirmed my diagnosis, which had been questioned by a lieutenant-colonel from another hospital.

Having exhausted all our interesting cases, he paid visits to the other hospitals in our district, amongst others that officered by the first Harvard unit, which was our next door neighbour.

One afternoon the nursing sisters gave a tea in his honor and were kept on tenter-hooks, though in peals of laughter, by his numerous sallies and kindly personalities with which he loved to tease the nurse in military as well as in civil life.

Perhaps my happiest memory of the visit of the Chief (as I still prefer to call him) is that of a delightful excursion to the little estaminet at Hardelot with Revere Osler, his son, Bill Francis, his nephew, and the writer, a former assistant in Baltimore. Of course he knew more of the historical background of the "Field of the Cloth of Gold" the site of which lay close by, than any of us, and he chatted in his usual informal manner about the meeting of Francis I of France and Henry VIII of England on that occasion.

I know his visit was saddened by the decision of his son Revere to be transferred from the C. A. M. C. to the combatant branch of the imperial service, which was successfully accomplished shortly afterwards.

After visits to other places of interest at the base and at the front, he left us on September 15th to return to his manifold official duties and countless social responsibilities in England. His visit was most appreciated by all of us and left every officer, nursing sister and man, inspired to try and "carry on" as he would have done himself.

SIR WILLIAM OSLER: THE LAST DAYS

J. George Adami, M.D., LL.D.

Liverpool

FROM one end of America to the other there will be those deeply attached to Osler—"our Osler"—who hunger to possess a fuller and more personal knowledge of the illness that took him from among us, and of the solemnly beautiful last service at Oxford on New Year's Day, 1920.

Most touching at Christ Church was the Psalm, "*Lord, Thou hast been our refuge.*" Clear and yet subdued the balanced voices of the choir led the congregation that filled the narrow Norman nave, transepts, and chancel of the Cathedral and poured over into the side aisles. It was in July that we had joined in celebrating Sir William's seventieth birthday, and now—"*We bring our years to an end, as it were a tale that is told. The days of our age are threescore years and ten, and though men be so strong that they come to fourscore years, yet is their strength then but labour and sorrow; so soon passeth it away and we are gone.*"

Could we in truth hold this to-day, when healthier conditions have added so materially to the expectation of life? As we sang it, I looked across the chancel at his "brother Regius," who had travelled from Cambridge to pay the last respects to the friend of so many years. The fine face of Sir Clifford Allbutt stood out like chiselled marble against the darker background. Bowed it was with age and with emotion, and I could not but think of all that he, now well over fourscore, had accomplished during this decade. What might not Sir William have brought to pass in another decade? I recalled that address, perfect in the delicacy of its feeling, with which, in the name of all of us, Allbutt made the presentation to Osler at the Royal Society of Medicine in July; those notable volumes on Arterio-sclerosis, with their maturity of judgment and felicity of language, published just before the War; and with that, by association of ideas, I recalled Osler's own favourite estimate of a man's age, not by years, but by the state of his arteries.

At seventy, Sir William was still in the thought of all of us in the prime of life. He came of a long-lived stock, and long life is pre-eminently an inherited possession. There were no signs of

arterial degeneration. We still endowed him with that extraordinary vitality which had been his ever since we first knew him. It is true that from the beginning of the last lingering illness he believed that the end was near. We who thought we knew him could not share that belief. We did not, or could not, read the writing on the wall. Yet looking backwards now, we realize that for the last eighteen months he had more than once succumbed to minor ailments which in the old days would have been thrown off with ease. There comes to mind the dinner which, in the warmth of his heart (who else would have thought of it?) he gave that last spring at the Athenæum in honour of the newly-appointed Professor of Medicine at Toronto, that he might introduce Duncan Graham to his fellow Professors of Medicine in Great Britain, the dinner that became as the play of Hamlet without the Prince, owing to the enforced absence of the host through illness. Almost we may date the beginning of the end from the day on which he attained to the allotted span of life.

It was on the eve of that day that Clifford Allbutt had made the presentation, and Osler had been profoundly affected. Returning to Oxford, on the birthday itself he took to his bed with a feverish cold, but the annual holiday which he took in Jersey appeared to restore the old vigour. He regained weight, bathed daily, and returned greatly benefitted. At the end of September, he was called up to Glasgow, and took occasion to journey over to Edinburgh to visit colleagues there. His return journey was arrested at Newcastle by the great railway strike. Unwilling to be detained, he eventually secured a car and motored thence to Oxford. The journey took two days in cold and cheerless weather, and there resulted an acute but irregular form of bronchopneumonia accompanied by great depression. Nevertheless, even in the early active stage, the physical signs and general condition did not seem to those in attendance to be as serious as he himself regarded them.

We who thought we knew him intimately were more sanguine than those further removed. Walking with Sherrington after the service, I heard from him the story of the old janitor at the physiological laboratory: "No, sir, I don't think Sir William will get better. You see, sir, it is like this: you know how Sir William, mostly on his way down to the hospital of a morning, would drop in for a few minutes to see you and the rest. Well, in

the old days, coming in, and likewise going out, he had always a word for me. You know his style, sir, like giving a man a cheery dig in the ribs. But now these last months I have noticed him greeting you quite merry-like; but in between whiles his face has been grave as though he had something heavy on his mind, and he has walked in and out without once noticing me. It is Mr. Revere, sir, and Sir William won't get better."

That old janitor had made the correct prognosis: he had observed more than did those of us who thought ourselves the children of light. Those who came to know Revere Osler in 1915 and 1916, at No. 3 Canadian General Hospital, will understand what that only son was to his father, and can imagine what his death at the front meant to him. Yet, Sir William's legend ran like the sun-dial's, "*Non numero horas nisi serenas,*" or better, in his own words, "*Æquanimitas.*" He had made it his rule in life to receive with equal mind the gifts and the stripes of fortune; and now not even those nearest to him should see how deep was the wound. He went about the day's work as before; showed the same keen interest in his friends and the profession: wrote to those friends the same abundant and characteristic brief notes of appreciation and encouragement; busied himself over his beloved library, adding to its treasures, elaborating the great *catalogue raisonnée*, and drawing out the conditions of his noble gift to the Medical Faculty of McGill University. He made his rounds at the Radcliffe with the same quizzical greeting and banter to patients, nurses, and colleagues. The memorable Sunday afternoons at Norham Gardens continued with scarce a break. The younger members of the profession, graduate and undergraduate, along with all Canadians and Americans who happened to be in Oxford, received the same warm welcome. Nor in all these attentions to his friends did he for one moment lack the whole-souled support of Lady Osler. Particularly during the last year did he have at heart the Fellowship of Medicine and the bringing together of the profession on the two sides of the Atlantic.

It was very wonderful. But the strain was too great. It would have saved him had he with Saul called out aloud in his grief. As it was, the hair that had been so raven black became greyed, and the face became lined; and acute observers, like the old janitor, saw the finer and surer evidences. Thus it was that through October, November, and December, he could not throw

off the illness. There was evidently delayed resolution, with a development of local empyema, and what is more, of multiple abscesses in the base of the lung. Pus was drawn off, and a few days before the end resection of a rib and removal of more pus appeared to arrest the process and bring down and steady the temperature. He was very weak, but appeared to have turned the corner, when on the last Sunday in the old year the rupture of one of the abscesses was followed by haemorrhage into the pleural cavity, and with that came the end.

So passed into history, untimely, even although he had attained unto the allotted span, "the greatest physician of history."* I confess that this characterization arrested me when I read it. We are not accustomed to measure up our friends against the giants that have been. And above all it is as a friend that during his life-time we regarded Osler; as one who possessed the genius of friendship to a greater degree than anyone of our generation. It was his wonderful interest in all of us that was the outstanding feature. Above all others the angel might write him as one who loved his fellow-men, placing him foremost among those whom God had blessed. It was from his humanity, his extraordinary interest in his fellows, that all his other powers seemed to flow. On thinking over those other powers, while we admit freely that there have been greater medical men—Harvey, for example, Vesalius, John Hunter, Claude Bernard, Lister, yet when we pass in review the great physicians, those who by their lives, their practice, their teaching, and their writings, have exercised the greatest influence over the greatest number of their fellows, putting together all those powers which make the complete physician, Osler must be awarded the first place. Hippocrates, while farthest away, perhaps comes nearest, yet he is largely mythical; Galen, high as were his aspirations, had but limited knowledge and could not escape from the trammels of tradition; Boerhaave, great as a teacher and clinician, was also under the trammels of authority, and in his writings did not advance his subject; Sydenham was a clinician of notable powers of observation and independence, but was no teacher and incapable of founding a school. Think of those years at Johns Hopkins, when Osler revolutionized the teaching of medicine and of clinical medicine in a community of seventy millions. Think of the influence wielded by

* Colonel F. E. Fremantle in a letter to the *Times* of January 2nd, 1920.

his textbook, not merely among English-speaking people, but the world over, even to China and Japan. There is no physician who during his lifetime has had so profound an influence upon so great a number: no one individual who has done so much to advance the practice of scientific medicine, no one whose personal intimacy with his fellows in the profession has covered so wide an area—Canada, the United States, Great and Greater Britain and the leaders in medicine the world over: no one, in short, who has combined in the same degree the study, practice, and teaching—the science and the art of medicine.

Christ Church, by its very foundation, is linked uniquely with the outer world. The Cathedral of Oxford is within its precincts and serves at the same time as the College Chapel. The Dean, as such, is Master of the College. Thereby, from the days of Cardinal Wolsey onwards, Christ Church has not been a self-centred community, but has served the city and the country round. It was fitting that, with his appointment as Regius Professor of Medicine under the statute which to-day calls upon the Colleges to contribute to the needs of the University by appointing one or more University Professors to Fellowships with the emoluments of the same (they call them "Studentships" at Christ Church), Osler became attached to Christ Church. Thus it was fitting that the last services should be held in the old Cathedral, full of history, that served not the college only, but the university and the city and the larger world.

With its pale yellow stone an appearance of incompleteness brought about by the arcading round the walls, which indicates where the cloisters ought to be but are not, "Tom Quad," the great court of Christ Church, looked strangely desolate and sad in the thin light of a vacation winter afternoon. One crossed it and passed through inconspicuous doorways into the noble old Cathedral. At first gradually, and then rapidly, the Cathedral became filled. One after another well-known figures took their assigned places, doctors and dons in their black silk robes, and those not of Oxford who had come from all over the country; the proportion of women in mourning was notable. In the chancel were seated the Vice-Chancellor of the University (the President of Trinity) with the senior and junior Proctors, and representatives of the many bodies in which Osler was interested.

There one recognized the President of the Royal College of

Physicians (Sir Norman Moore), historian of St. Bartholomew's Hospital, and Dr. Ormerod, the Treasurer of the Royal College of Physicians, who shared Osler's fondness for the old classical writers, Sir George Makins (President of the Royal College of Surgeons), Sir Clifford Allbutt from Cambridge, and with him Dr. G. H. F. Nuttall, an old colleague of Sir William's at Johns Hopkins and now a Cambridge professor; Sir Humphry Rolleston (President of the Royal Society of Medicine); and Sir D'Arcy Power (representing the section of the History of Medicine of that Society); Sir W. M. Fletcher (representing the Medical Research Committee); Colonel D. Harvey (representing the Director General of the Army Medical Service; Professor Gilbert Murray representing the Classical Association) with his wife, Lady Mary Murray; Dr. W. Collier, Osler's colleague in Oxford (representing the British Medical Association); Mr. A. W. Pollard, of the British Museum; Professor C. J. Martin (representing the Lister Institute); the Rev. G. B. Cronshaw (representing the Radcliffe Infirmary); Professor Elliott (representing the Oxford Eye Hospital); and many others representing such bodies as The Research Defence Society, The London School of Medicine for Women, The Ashmolean Natural History Society, University College, London. The University of Edinburgh was represented by Professor J. Arthur Thomson; that of London by Professor Sir W. M. Bayliss.

Of those recalling Osler's association with the United States besides Dr. Nuttall there were Dr. G. E. MacLean (late President of the University of Iowa, now head of the American University Union in Europe, British Division), Viscount and Viscountess Harcourt, Dr. E. J. Wood (representing the Association of American Physicians); and Professor Pearce (representing the University of Pennsylvania). Osler's Canadian associations were represented more particularly by Sir George Perley (on the part of the Government of the Dominion); as regards Toronto by Professor and Mrs. Ramsay Wright, now resident in Oxford, by Lieut-Colonel Donald Armour, the surgeon, and Lieut-Colonel Badgerow. McGill University was represented by two among the mourners who had been in close attendance upon Sir William, namely, Major W. W. Francis, his nephew, and Dr. Archibald Malloch; Colonel Chisholm (representing the C.A.M.C.), Dr. C. G. L. Wolf (now lecturer at Cambridge University); and,

perhaps above all, by Lady Strathcona, daughter of the late Chancellor of the University and daughter-in-law of the old Dean of Medicine to whom Osler owed so much,* who with the exception of his brother, Mr. Frank Osler, had known Sir William for a longer period than anyone there present. Other Canadian friends were Sir G. L. Parkin (of the Rhodes Scholarship Trust) Mr. Donald Macmaster, M.P., and Colonel Dixon, C.A.M.C. Even Skagway, Alaska, was represented (by Dr. Gabie).

Old and intimate friends of Sir William's were Sir William Hale-White, Sir Archibald Garrod, Sir William Church, Sir Frederick Treves, Sir Charles Ballance. These formed but a few of the great congregation.

As the time drew nigh, the Mayor and members of the Corporation appeared, preceded by the City Mace wreathed in crêpe; and then, after an interval of waiting, the western doors were opened letting in the winter sunshine, and the coffin, covered by a pall and a single wreath of lilies, was borne up the main aisle followed by the mourners. It was brought to rest under the great tower at the intersection of the nave and choir. The mourners were grouped to the right, extending into the north transept; the choir and the main group of Professors and University graduates to the left, filling up the south transept. It was a brief but very beautiful service, the Dean of Christ Church officiating. Two hymns were sung: "O God our Help in Ages Past," chosen by Lady Osler; the other, Sir William's favourite, which Dr. Francis tells me he often asked to have sung to him in his last illness, namely the beautiful twelfth century Latin hymn of the great Peter Abelard, beautiful alike for its words and for the melody, and full of that spring-like cheeriness which is so characteristic of the Twelfth Century Renaissance. The English translation, by J. H. Neale, is well-known, and is to be found in all hymn books, namely, "O what the joy and the glory must be." The original Latin version is given in the hymn-books of Christ Church, and I reproduce it here:

O QUANTA QUALIA

O quanta qualia sunt illa sabbata,
Quae semper celebrat superna curia,
Quae fessis requies, quae merces fortibus,
Cum erit omnia Deus in omnibus!

* The late Dr. R. P. Howard.

Quis rex, quae curia, quale palatium,
Quae pax, quae requies, quod illud gaudium!
Hujus participes exponant gloriae,
Si, quantum sentiunt, possint exprimere.

Vere Jerusalem illic est civitas,
Cujus pax jugis est summa jucunditas,
Ubi non praevenit rem desiderium,
Nec desiderio minus est praemium.

Illic ex sabbato succedit sabbatum,
Perpes laetitia sabbatizantium,
Nec ineffabiles cessabunt jubili,
Quos decantabimus et nos et angeli.

Nostrum est interim mentem erigere
Et totis patriam votis appetere,
Et ad Jerusalem a Babylonia
Post longa regredi tandem exilia.

Perenni Domino perpes sit gloria,
Ex quo sunt, per quem sunt, in quo sunt omnia;
Ex quo sunt, Pater est, per quem sunt, Filius,
In quo sunt Patris et Filii Spiritus.

Then, with the benediction, the congregation dispersed, leaving all that was mortal of the great physician at rest for the night in the Lady Chapel, by the grave of his old friend, Burton of "The Anatomy of Melancholy."

The next morning, his remains were conveyed to London to the crematorium, where Lady Osler and her sister Mrs. Chapin, Mr. Frank Osler, Dr. W. Francis, and Dr. Malloch were alone present at the Committal Service.

By the time this appears in print, it will be known by all that, in accordance with his expressed desire and as a last gift, Sir William's ashes are to be conveyed to Montreal, there to be deposited in the midst of his books in the Medical College of his student days, in which he held his first Chair, and which, to the end, retained his deep affection. In that collection is concentrated the whole history of medical progress. There is nowhere so choice and well-selected a corpus of medical literature. Noble in itself, the gift is doubly ennobled by having associated with it all that is mortal of the great physician, whose remains, after all his wanderings, are to come thus to rest in the country of his birth. McGill is to become his shrine; and for generations to come, those who love medicine and its history will find their inspiration in that room, where, surrounded by the books he loved so well, repose the ashes of William Osler.

The Oxford memorial, showing the Vernon plaque of Osler beside the full-length statue of Sydenham.

WILLIAM OSLER

O say not he is dead; what messenger
Could circle round the world so dark a tale,
Knowing there is no rending of the veil
Dropped between those that are and those that were?
Can he be dead, the dear philosopher,
Master and friend and pillar of the frail,
The true knight seeking ever for the grail,
The great soul, of great souls the interpreter?

His torch was lighted at the infinite
And steadfast will remain. If men could lose
The genius of his work, if Time could dim
The vision pure that ever sought the light,
If death could kill the spirit and refuse
Immortal life . . . . then might we weep for him.

MARIAN OSBORNE.

DEATH OF SIR WILLIAM OSLER

T. R. BROWN
Baltimore

SINCE the appearance of the last number of this *Journal**, news has come of the death, on December 29th, of Sir William Osler, Regius Professor of Medicine at Oxford University. His life was such a full one that it is obviously impossible to give here even a brief outline of his many activities and achievements. But in these days, when, after a war of surpassing horror following an age of brutal materialism, we see or perhaps feel rather than see, the first faint movements of a new idealism, one *must* call attention, albeit in a few words, to what Dr. Osler stood for, for what he strove, what doctrines he preached, what help he gave and what he accomplished in bringing Medicine into its larger and more ideal field so that it is becoming in fact, as well as in name, a real science and a true art.

. . . . . .

To few, if any, physicians have come so many opportunities in so many spheres of usefulness; by no one have such opportunities been so well embraced. In the world of affairs, to every question he brought profound knowledge and great judgment, while in the world of men no one lived more closely by the Golden Rule in example, in word and in deed; to the weak he brought strength, to the discouraged hope, to the blind clearer vision, and to those in trouble, help and comfort and peace. By his death the world of medicine and of men has suffered an irreparable loss. The student has lost a friend who, however heavily weighted down with years and with honours, looked at life with the eyes of youth; the elder physician, a wise councillor and "ever present help in time of trouble"; the world of letters a writer whose essays and lay sermons will find a real place in our permanent literature; the medical fraternity a great teacher and a constant inspiration; the public a great physician who always gave the best that was in him without stint, and the world a great man who, when so many about him were "lead and lath and talc," was himself always "steel and pine and crystal."

* Extracted by permission from the Bulletin of the League of Red Cross Societies-No. 17, Vol. 1, February, 1920.

WILLIAM OSLER, CLINICIAN-TEACHER*

STEWART R. ROBERTS, M.D.

Atlanta, Ga.

It is well to cherish the times and places of the most finished clinician, the most persuasive teacher, and the most pleasing personality that this Western world has given to our profession. His birth and education and early teaching were in the Dominion of Canada. The labor and service of his prime were in two cities and centers of medicine in this Republic. His statelier fame came at the seat of the far-ranged Empire, where he dwelt among his peers. There he worked full in the face of the Western sun, met the mellow three score years and ten, received the plaudits of his fellows, saw the gleam of the evening star, and heard the one clear call. His going was probably hastened by the battle field death of a mere youth and only son, who for a short while held high the torch while the poppies were growing in Flanders fields. As a certain poet sang of a soldier so we may say of Osler, "And glory was the least of the things that followed this man home."

The study of the combination of qualities that makes a great clinician is interesting. Man unwell is the problem of clinical medicine, the clinician is the artist, and clinistry the science and the art. It is a science of fact and probability and an art of tact and experience. Here "was a wise man and the chief of his art." He based his clinical knowledge on the solid foundation of morbid anatomy, and his daily rounds were from patient to laboratory to library. His true kingdom was a clinical kingdom, the kingdom of the bedside. He accented the patient as the real source of our knowledge. He believed in the study of the patient, in the examination of the patient, in the treatment of the patient. Histories were precious masses of experience to be filed for reference. A diagnosis was something more than a reaction in a test tube, a microscopical view of a preparation, a reading of a scale, an interpretation of a tracing or a switch of amperes on a photographic plate. He was a constant devotee of the laboratory, but he considered it a clinical aid rather than a clinical finale. He

* Oration on Medicine, Southern Medical Association, Seventeenth Annual Meeting, Washington, D. C., Nov. 12-15, 1923.—Republished from *Southern Medical Journal*, January, 1924.

steered midway between a flagrant empiricism and generous use of drugs on the one hand, and a therapeutic nihilism on the other. He would use anything that seemed of promise to the patient, though he "was never disposed to use a drag-net in medicine." Patients whose physician was without books and journals and medical associations were a chartless sea, and all these without patients were no sea at all.

He came into the sick room or ward with a quick and easy step, a smile and all good humor. At another time, as occasion required, there was a silent seriousness and a deliberate meditation. He was always slow to give his opinion until he was sure, and then he gave it in a few words. Always he aroused confidence and the feeling that if left to him, all would be well. His very presence in the sick room was a lesson in clinical faith and an unconscious psychotherapy. He brought to the bedside the poise of equanimity and a cosmopolitan training, a neatness, a polish, an address, and withal that fair and courteous grace which we call good breeding. There were inborn gifts of heart and head, both of which are equally demanded by the practice of medicine, which brought him before great men and led him to the seats of the mighty. He took careful notes and his memory of cases and patients was remarkable. Work, simplicity and thoroughness were his clear duty with each patient. He was always just himself without clinical pomp or therapeutic pretense.

His clinical axioms are proverbs: "Get the patient in a good light. Use your five senses. We miss more by not seeing than we do by not knowing. Always examine the back. Observe, record, tabulate, communicate." When you have made an observation of value or reached a conclusion concerning the unusual, publish it. Avoid carrying unpublished knowledge to the grave. The three great foes of the physician are "ignorance, which is sin; apathy, which is the world; and vice, which is the devil." He admonished us to be wise with the foolish, strong with the weak, and righteous with the wicked.

Man kept well is the problem of preventive medicine. The modern public health expert is an emissary of the more abundant life on earth. Osler the clinician threw the weight of his time, energy and influence to preventive medicine. His work for public health offers material for a long paper. The thirteenth essay in "Æquanimitas," Medicine in the Nineteenth Century, will make

us all helpers of the public health, for in a sense we are all keepers of our brother's health. Jeremiah the prophet wrote of "a time of health."

The son of a minister, he came of a family with the trick of supremacy in the blood. After four years in college, four years in the medical school and two years in Europe, he began to teach at the age of twenty-five. He taught clinical medicine for forty-five years: nine years at McGill, five at the University of Pennsylvania, sixteen at Johns Hopkins, and fourteen at Oxford. Through all these years his virile mind literally covered the literature of man. He was a mature student who read and remembered all his days, for "studies serve for delight, for ornament, and for ability." He taught by the spoken word and the inspiration of his presence. He taught in wisdom by the printed page that brought him "mind to mind" all over the world "in promoting sound knowledge;" he taught by his own life, for he "always valued the message of the life" above the message of the tongue or pen. Apart from his own life, his greatest contribution to medicine is the life of his students, Canadian, American and English, and through them to the uttermost parts of the earth. To them he emphasized the ideal of living for the day and the day's work and taking no thought for the morrow.

He brought his vast storehouse of knowledge and experience to every case and class and problem. He was to his students, to quote one of them, "our cloud by day, our pillar of fire by night." He himself "was but a student of health and disease, of men and morals, who was always teaching some new lesson of medicine or of living." He made plain the way of clinical medicine and accented the common diseases of which the common people suffered. His words were simple, his sentences short, his illustrations apt, and he seemed never at a loss for a reference, a quotation or a happy turn. May we not learn from him that the time has come for a rebirth of clinical medicine and a rediscovery of the patient, for truly the art of medicine is the heart of medicine. May we hope that the day is near when all his living students, both of class and page, may unite into an Osler memorial for the promotion of medicine and the fraternity of medicine among all the English-speaking people of the earth, and a foundation that would do him honor. We need to cement through his memory all English-speaking medicine.

He believed that the master word of medicine is work, and nowhere is this better illustrated than in his writings. Many medical men of splendid training deprive the profession of their knowledge and experience because they never write. One may live on the printed page as well as in one's children or on a monument. The only way for the average man to learn how to write is to write. During his life he wrote more than twelve hundred separate papers. His text book, used everywhere and translated into other languages, is as much a classic as a text book and is in its ninth edition. His "Modern Medicine" is in seven volumes and has had two editions. There are several monographs with the titles of "Angina Pectoris," "Chorea," "Abdominal Tumors," and "The Evolution of Modern Medicine." The twenty-two essays in "Æquanimitas" will const tute probably in time to come the most lasting of all his writings, and in power for good outdo the "Religio Medici" of his beloved Sir Thomas Browne. Every medical student should read it before graduation and then reread it in his medical life, and all of us should try to live it.

It is difficult to delineate a personality. Perhaps only Plato with Socrates, Plutarch with his Ancients, the Four Apostles with their Gospels, Shakespeare with the human nature of us all, and John Bunyan with the dream of his Pilgrim, have really succeeded. And then I never saw him, as young Henry Gray wrote in his "Anatomy," in the recent state. Somehow my younger, sunnier path never crossed his older, wider way. But I know he was teacher, friend and fellow student to every man who passed on the road to life and knowledge. He willed to us, his brethren, his chief virtue, which is charity, and the children of charity, which are unity, peace and concord. "The life agreeth with the fame" and of such is the ideal physician of the modern time, if not of all time. I know he has always been the wise friend of my clinical life, the unseen consultant with my patients, the Abou Ben Adhem of my spirit. I know that those who walked with him do but quicken and grow tender at the thought of him, and his impress is upon them all. I know he prayed to medicine a myriad prayer, gave to life a greater art, and made us wish a nobler part. I know that at his touch medicine

> "But doth suffer a sea-change
> Into something rich and strange."

Addenda

THE HEALER

WITH glad assurance men once sought the shrine
Of him who snatched Hippolytus from death;
So, in this after-time the eager breath
Of rising hope doth quicken and incline
Aspiring footsteps to the famed confine
Of Epidaurus, now in Albion,
Where dwells Apollo's latest mortal son
In bowered temple rich with eglantine.

There, too, come countless friends with single quest
To see the man, whose simple human art
Is to bestow with generous thought and free
On fellow-man, his ever welcome guest,
The golden treasures of his mind and heart
Of ancient lore and life's philosophy.

MARIAN OSBORNE.

RECOLLECTIONS OF DR. OSLER'S METHOD *

Harry T. Marshall

University of Virginia

SEVERAL of the articles in appreciation of Sir William Osler attempt to portray the vividness and charm of the Osler clinic and pay tribute to his genius as a teacher. Also, it has been held up as one of his greatest achievements that he introduced into American medical schools the method of clinical instruction now widely employed. But while much is said of the brilliancy of Dr. Osler as a teacher, his method receives only scant notice. In fact, it is taken for granted that all medical readers are familiar with a method so generally adopted to-day. It may, indeed, seem banal, at this late day, to claim that a method, now routine in all clinics, was actually a distinct characteristic, even among those many luminous traits, which distinguished Sir William Osler. Nevertheless, it comes back to me that Osler's method excited some perplexity, no little discussion and differences of opinion among the students during the early years of the Johns Hopkins Medical School.

The medical clinic was quite different in its method from any form of instruction which the students had encountered. It was unlike the intelligent neglect which bewildered us on our entrance into the dissecting rooms; it differed from the orderly avalanche of knowledge which swept us along through physiology and pathology; nor was there any similarity between Osler's method and the methods of instruction in histology, pharmacology, bacteriology or obstetrics. This, at least, was apt to be the student's first impression, though some kinship among the methods might appear on trerospect.

However widely our laboratory courses differed, they were alike in presenting definite subjects arranged in definite order. After this training some of us found it difficult to keep our bearings in the drifts of the dispensary and clinic. I suspect that some members of the class felt that we aimed in no fixed direc-

* Received for publication in Second Impression, August, 1926.

tion, and arrived nowhere. I have even heard some condemn "the chief" as "non-scientific." But as our horizon widened, we perceived that we were moving in a definite direction, and at a speed limited only by our own abilities. Furthermore, it gradually dawned on us that if Science be "orderly knowledge," then was Dr. Osler indeed a "master of science," or more truly, a "master of clinical science." It was confusing to find that his classifications often failed to coincide with those of the anatomist and pathologist, but invariably they were of particular value for the diagnostician. His groupings for diagnostic objectives were as logical in their way as the etiological classifications of the bacteriologist.

Dr. Osler's method of presenting a subject to his students was so direct and natural as to appear quite artless. The analysis of his method seems, correspondingly, all the more ponderous. In conducting his clinic for third-year students, Dr. Osler would have a patient presented before the class. Usually one or two students were called on to point out such features of disease as they could detect. Frequently by a smile, a question or a glance, Dr. Osler set them on the right track. After fitting together the students' findings with the history, Dr. Osler would demonstrate to the class some distinctive feature of the case: a swollen joint; a tremor, or a rash. By the time the several features presented by the patient had been pointed out, the students were quite at sea, though they were interested and inoculated with their teacher's enthusiasm. Dr. Osler then interpreted the findings. Each important sign and symptom was weighed. What various meanings *might* each have? What *did* it mean in the case at hand? As the discriminating analysis went forward there usually appeared a choice among several possible diagnoses, often requiring another look at the patient, until a final differential diagnosis was reached.

The case as presented was next considered from a different standpoint. Does this patient present a clear or imperfect example of the disease? An early or late case? Mild or severe? Simple or complicated? What is the outlook? What is to be done?

At his best Dr. Osler would then compare some special feature of the case with others from his own experience, or from his wide reading. Interesting as the first part of the clinic had

been, the last part was often the best. The old masters stood revealed long enough for us to sense their genius and clear vision, and then we were led on to feel the thrill, the adventure and the hazard of making a correct diagnosis in the presence of conflicting evidence; we perceived what scrupulous care is needed to prevent misinterpretation; we were impressed by the burden of responsibility resting on the diagnostician, and we went away with a vivid impression of at least one human malady, and often, also, with silhouettes of other diseases that lurked along the diagnostic trail.

At first the medical clinics, though exciting experiences for the medical student, were more or less disconnected, but it soon became evident that these were not mere exhibitions of diagnostic skill; there always seemed to be three goals which Dr. Osler aimed at. First, he brought to the aid of the patient the wealth of his personal experience, reading and judgment; secondly, he established each important case as a focal point for his students upon which converged all the devious paths of diagnosis applicable to the case, each with its pitfalls and slippery turns; and finally it was clear that Dr. Osler was studying the case for his own future use, and, by his method of teaching, was integrating the special features of the case in an orderly manner in the files of his memory.

In this brief memoir there is no room to dwell upon the charm and vivacity of Osler, the teacher, nor to do more than refer to the magnetic interest which his personality induced in every case he presented. Here I would call attention to a method, a method unsuited in many ways to the laboratory, but none the less orderly and scientific; a method admirably suited to accurate diagnosis, to the training of clinicians, and to broadening and ripening the judgment of a consultant.

In this method Dr. Osler, consciously or unconsciously, adhered to a well known rule, as advised by Huxley and others; he started with the obvious and tangible, and worked out into the unknown. Taking a method familiar elsewhere, Dr. Osler developed it into a characteristic personal trait.

Osler's method is, after all, no recent discovery of his own, though his genius made a new thing of the method. Over and over it has happened in the history of medicine that stale customs and theories have choked the path of progress, until

one of penetrating vision, an Hippocrates, a Sydenham, a Morgagni, has found a clearer path open to him who tries simply to see the facts before him, and see them truly, and in their own setting. This, it seems to me, was accomplished by Osler through his method; a method which formed a small part of that rare blend of genius, high character, personal charm and intense vitality which was Sir William Osler.

PERSONAL REMINISCENCE*

L. G. ROWNTREE, M.D.

Rochester, Minn.

COMPELLING interests largely determine our sphere and our fate. Osler fired my enthusiasm long before I ever met him. His writings have always stirred me as nothing else has done. From my earliest student days, he has been to me as inspiration, guide, philosopher and friend. I accepted him then at the estimate of one to whom I also owe lasting gratitude, Dr. Hugh McCallum, my old professor of medicine. He was one of Osler's disciples, and openly worshipped at his shrine. Knowingly or unwittingly he taught us to revere Osler as the greatest physician and one of the greatest men that Canada has produced.

Osler's love of books was contagious. My first surplus was invested in his bedside library. These books I have always loved. On leaving school, I practiced medicine in Camden by day, but spent my evenings with Osler's books.

In 1907, he visited Philadelphia and talked on the value of drugs. Of these he said that some thirteen were important, but refused to mention them by name. While deprecating much drug therapy he commended Harrison Sainsbury's *Principia Therapeutica*. But what was to me of much greater moment, he spoke of Celsus and the joy and value of knowing the old masters. At the close of his talk, I would naturally have liked to talk with him, but lacked the temerity. His talk, which was apparently extemporaneous, made a tremendous impression, at least on me. I was impressed then, as later, with his personality. He was the

* Received for publication in the Second Impression of this volume, August 19th, 1926.

soul of simplicity and equanimity. He took for granted his assured position and only seemed intent on giving pleasure to his audience. He was alert and vivacious, though gentle, his voice carrying without great effort. He seemed actually to enjoy his own talk, his face kindling with pleasure and kindliness, especially in the whimsical moments so characteristic of him.

That very night I turned to him for advice, writing that I wanted six years' training in medicine and intended to take his advice no matter what it involved, or where it carried me. Within the same month he wrote me as follows:

May 31, 1907

"To Dr. L. G. Rowntree:

"The place for you to go to is the Hopkins. If you could arrange to work for six years and wish really to get at the roots of things, attach yourself to Dr. Barker's clinic and gradually work into line. . . . Of course, it means a great sacrifice (of time) for you, but you have youth, and probably brains, and if, attached to these, you have the necessary perseverance with enough cash to keep you floating, six years of hard clinical work should put you in a first-class position in the profession. With kind regards and best wishes.

Sincerely yours,
Wm. Osler."

It was, therefore, on his advice, and through letters that he wrote to Dr. Barker and Dr. Thayer in Baltimore, that I was accepted as a voluntary assistant in the wards and laboratories at Johns Hopkins. It was also indirectly through Osler that I had the opportunity of working with Dr. Abel.

In 1909, Dr. Osler returned to Baltimore to dedicate Osler Hall. He also talked before our historical club on "Servetus." To my great astonishment he actually remembered me. One day I was called to the office of the medical superintendent, Dr. Hurd, and there met Dr. Osler. He said that he had been keeping an eye on me and had inquired about me from time to time and that the reports he got were not so bad as they might be. He asked me what I was doing and about the details of the work, and then, with a pat on the back, advised me to keep right at it.

In 1913, he returned to Baltimore and gave the opening address, "Specialism in the General Hospital" at the opening of the Phipps Psychiatry Clinic. Before leaving, he visited the laboratories, where, I recall he had a spirited passage at repartee with one of his old colleagues. He took time to sit down with each of the younger men and to discuss with us the work we had in progress. Evidently, he was truly interested in everything he saw,

for, at the International Congress of Medicine in London the following August, I was greatly surprised to receive from him a pencilled note saying that a paper was to be given on Liver Function by Dr. Straus of Berlin, and that he would call on me for discussion. As presiding officer, and by way of introduction, he said that he could see in the audience a young friend of his who was greatly interested in this subject, and that he would like to have me discuss the paper and say something of the new work we were carrying on in Baltimore. At the close of the meeting he laid his hand on my shoulder and said: "Keep up the good work."

That was the last time that I saw Osler, although I had considerable correspondence with him during the war concerning the possibility of getting into military service. During my service in the American Expeditionary Force I visited Oxford after the close of the war but at that time Osler was ill, confined to bed, and denied to all visitors.

To me, Osler and his writings are just what they always were, the source of the greatest inspiration. To Osler I owe not only the will to do, but also the opportunity to develop.

DR. OSLER AND THE ORGANIZATION OF THE AMERICAN MEDICAL ASSOCIATION*

P. MAXWELL FOSHAY, M.D.

Montclair, N.J.

THIS note is justified only through the emphasis it affords of the remarkable breadth of Dr. Osler's mental horizon. Outstanding clinician, learned scientific physician as he was, he had a keen interest in the relation of his profession to the public. Medicine should hold a more commanding position in national life and progress.

In the closing years of the last century medicine as a moiety of the American social organism did not occupy the place to which it was entitled, at least by its ambitions. The profession was making genuine scientific progress, but with few exceptions its societies were unrepresentative of its highest ideals. The

* Received for publication in the Second Impression of this volume on August 13th, 1926.

medical journals of that day in the United States were a sorry lot. New societies of a higher type were being cultivated, and a few medical editors—notably Dr. George M. Gould—were striving for a new medical journalism that should be independent of any sort of lay "business" control and free to express the best medical opinion.

My all-too-few contacts with Dr. Osler came through these lines of action and they were inspiring in a superlative degree. I had heard him lecture at the University of Pennsylvania though not in his class, and like every student who heard him became an ardent admirer. Later, I met him here and there, and especially in connection with futile efforts to have him address the Cleveland Medical Society and the Ohio State Medical Society. But, when in 1900, at the meeting of the American Medical Association, the President, Dr. Charles A. L. Reed, appointed a Committee on Reorganization, consisting of Dr. George H. Simmons, Dr. Joseph N. McCormack and the writer, then this, to me, newer and extraordinary phase of Dr. Osler's noble personality unfolded.

He became deeply interested in the plan to make the American Medical Association represent to the world the highest professional ideals. On several occasions, notably at Saratoga in 1902, I conferred with him and secured, with enthusiasm, his hearty support of the plan to have a genuinely organized medical profession with integration of local, state, and national societies. He saw enormous possibilities in the public good, to come from thorough organization of the profession. He was most encouraging to the dream of a great co-operative organism that would lift the profession's standards within itself as well as present to the world a more dignified and better-educated body of men.

While the reform was being splendidly supported by the leaders of the profession throughout the country, from none was there more hearty inspiration than from Dr. Osler, and from Dr. Welch. It seemed to me then, and yet does, a remarkable evidence of the many-sidedness of Dr. Osler that he should turn with such energy from his superb clinical work and his inspiring teaching to the public-service aspects of medicine. So few can have the mentality to grasp with penetrating vision the possibilities of fields so diverse. It requires no exaggeration to assign to Dr. Osler as counsel and friend-to-the-cause a

signal part in the successful efforts to set the American Medical Association on the track that it has since, under the far-seeing leadership of Dr. Simmons, followed with such admirable results.

As Dr. Osler's part was characteristically played in private, it is no less than justice that it should be recorded.

OSLER AND TRUDEAU*

LAWRASON BROWN, M.D.

Saranac Lake, N.Y.

OSLER was Anglo-Saxon with the charm of the Celt; Trudeau was half-French, half-American, with the charm of the French. Curiously, one came directly from Canada; the other claimed it as the land of his *voyageur* ancestor. Both were close to the pioneers of the New World; the father of one, the grandfather of the other lived on virgin soil. The one lived among, loved, and influenced great numbers of men. The other in youth was forced to seek opportunity in the wilderness, near the land of his forefather. Good health never failed the one and he died at seventy from a young man's disease. Ill health dogged relentlessly the steps of the other and his arch enemy claimed him after a struggle of over forty years at sixty-six.

Both were deeply interested in the problems of tuberculosis. Osler lived among the crowd and emphasized prevention. Trudeau dwelt in the wilderness with the individual, and spent day and night longing for the cure. Trudeau founded for the cure of the individual the first sanatorium in America. Osler was instrumental in bringing about the formation of the National Tuberculosis Association to carry the fight of prevention to the masses. Sociological prevention activated Osler; search for the Holy Grail of cure fascinated Trudeau. Trudeau thought in laboratory terms; Osler worked with laboratory exactness in clinical medicine. Both were deeply interested in but neither wrote on the early diagnosis of pulmonary tuberculosis. Trudeau searched for the early stage of the common proliferative type to arrest it; Osler was beguiled by the rare exudative form. Trudeau contributed much to scientific laboratory work in tuberculosis; Osler chiefly to the

* Reprinted from *Amer. Rev. of Tuberculosis*, 1925, xi 374, for Second Impression of this volume.

more general problems. Osler's work in tuberculosis influenced and stimulated many while he lived, including Trudeau. Trudeau's work to-day has become a tradition and still influences thousands.

The true estimate of the worth of any scientific worker, of his influence upon and good to the world, depends directly upon the number of workers to whom he passes on the torch of scientific investigation and in whom he instils the love of mankind. The work of Osler and Trudeau will be superseded, but the spirit they bequeathed to the following generation will eventually invade the uttermost parts of the earth.

A FEW VIGNETTES OF SIR WILLIAM OSLER

From the Memory of Kate C. Mead

Middletown, Conn.

(1890–1893)

IN thinking about the early days of the Johns Hopkins Medical School when all of us were young, many vignettes of its famous faculty come into my mind, among them several of Dr. Osler, or merely "Osler" as he was familiarly called by the "post graduate" students.

One of these pictures silhouetted on my mind is of Osler walking briskly along Charles Street with the Sunday crowds, a slender boyish figure about forty years old, with a long drooping black moustache, tall silk hat, high collar and bright tie, a cut-away coat and striped trousers, twirling his cane absent-mindedly as though, like Browning's Pippa in old Asolo, a day in the city streets were one of the pleasures of life, and he himself "One of the happiest Four" in Baltimore.

Another picture is of Osler at the Boston Symphony concerts listening to music. Most of the Faculty bought season tickets for these annual concerts and Osler was always one of the first in his seat. When the music began he sat with his head forward, his right arm resting on the back of the chair next to him as motionless as if hypnotized by the sounds; perhaps he was taking deep draughts of emotion to help him in solving some of the mysteries of this world, but soon it would seem as if we could almost "hear a long sigh, easing the utmost heaviness of music's heart," and then he gave himself up to the magic and enjoyment of the hour, quite forgetting the miserable human creatures whom it was his daily task to cure, relieve, and comfort.

Yet another picture shows us a very sad Osler, almost crushed by the sickness and death of his first baby. To us it was a great tragedy that his child should die in the midst of all the medical skill concentrated in that great hospital and focussed on its little suffering body. Isabelle Hampton herself superintended the nursing and sent out hourly bulletins about its condition which gave us alternately hope and fear

until, all too soon, its flickering flame of life was snuffed out just like that of any other baby of far less promise; it was a long time before Osler laughed his old hearty laugh again, although he wore a brave mask as he went about his daily work.

It was quite another Osler, however, who greeted his old mother when she came down from Canada to visit her famous son. He, gay and sparkling, she, sedate and erect in spite of her ninety odd years, her bright black eyes watching him in adoring pride as, with enthusiastic pleasure, he introduced his friends to her. Not even the portrait of Whistler's mother is more beautiful than this portrait of Osler's mother, for beside her stood her son, her facsimile, still young and in his prime.

Many other pictures of Osler come into my mind, chiefly in his professional capacity. At the weekly medical meetings for the discussion of ward cases his face was always a study. His senses were as alert as those of a miner washing bushels of sand for a few nuggets of gold while he listened patiently to every "case," either to detect flaws in diagnosis or to throw new light on obscure points. He was always ready to say a few words of appreciation about any well presented paper, never wholly condemning the theories of others if they seemed to have some good ideas, but explaining why certain conclusions appeared to him unjustified, although apologising for being so presumptuous as to "criticise so good a paper."

Osler in the wards, among the poor fellows who were dying of the Chagres fever, was more than a doctor, he was a priest as well. In those days the men who were digging the Panama Canal became so severely infected with malaria that they were sent north to die, with spleens as big as melons and skin as yellow as saffron, so anæmic that no amount of quinine could save their lives. For them Osler always had an affectionate pat on the head, a hopeful word, honest praise and hearty appreciation for their heroic work and courage, though with a flickering smile he would turn away breathing a verse from Holy Writ, and we knew that to him we were all simply "God's puppets, best and worst—there is no last or first." Fortunately, Osler lived for many years after Ross had discovered how malaria was transmitted and Gorgas had put into execution those sanitary reforms which made possible the final digging of the Canal through the elimination of the mosquito.

Those were the days of the long, cold "tubs" in serious cases of typhoid fever, and great was Osler's delight when a perilously sick patient recovered under this somewhat strenuous treatment. On the other hand it was interesting to watch his unhappy expression while a rebellious patient was having gastric lavage. He hardly enjoyed the process any more than the victim, and he looked as if he wanted to say: "My child, it hurts me more than it does you, but it is for your good and it won't last long."

To women doctors Osler was always a friend and counsellor. He treated them according to their merits, quite as the equals of men doctors, but because they were women he humorously warned them not to jump at intuitive conclusions, but always to investigate every symptom of disease most carefully, whether at first glance it seemed obviously imaginary or secondary, and never to be misled by sympathy for the patient, or by some other person's diagnosis. If we, his students, learned to have less faith than our predecessors in the value of drugs we caught from him the spirit of wholesale prevention of disease and the eradica-

tion of its causes. He continually urged us to buy medical books and study them, to write medical papers and publish them, to visit hospitals at home and abroad, and to watch autopsies for the sake of finding out something new in pathology, to take pride in discovering treasures in the history of medicine, to have wholesome fads, but above all to be true to ourselves and never let "second best" take the place of best in the care of our patients. He took a special interest in the points of view of women as doctors and felt that their interest in gynæcology, pædiatrics, and nervous diseases, and their age-long attention to details, should be of enormous advantage to the medical profession as well as to their patients.

Like all great men Osler knew that his own fires and those of everybody else needed constant stoking, but he never thought that his own flame would shine more brightly by extinguishing that of another no matter how low was its candle power. It is perhaps for this reason that he won the undying affection not only of his pupils and patients, but also of his colleagues, every one of whom rejoiced at the material benefits which came to him, at the royal recognition which was bestowed upon him, and at his great renown all over the world when, as Sir William Osler, he pursued his life work to its end in the England which he loved.

Madrid, November 2, 1926.

PERSONAL REMINISCENCES OF SIR WILLIAM OSLER

W. GRANT STEWART, B.A., M.D.

Montreal

IT is forty-five years since Osler first entered my horizon. I was then a student in the Arts Faculty of McGill University. I used to meet him regularly on his way to lecture, and on frequent occasions heard him spoken of as one of the famous group which at that time controlled the Medical School.

I have a distinct recollection of the night in 1884 when he took his departure from Montreal for Philadelphia, and was one of the large company of students who saw him off at the old Bonaventure Station.

Since then I have heard him deliver many of the addresses contained in *Æquanimitas.*

An interesting sidelight on his career which I have not seen in print was related to me by Mrs. Lloyd (who is still alive) sister of the late Dr. Palmer Howard. At one period of Osler's student days he became greatly discouraged, and intimated to Dr. Howard his intention to abandon medicine. Dr. Howard, who had a wonderful influence over the young man, persuaded him to go on with his course.

Illustrating Osler's remarkable memory for faces and incidents, the following is a personal experience. In December, 1903, he came to address the Montreal Medico-Chirurgical Society. Dr. Birkett, the President, invited a few friends to meet Osler at dinner previous to the lecture. Unfortunately, delayed at an obstetrical case, I did not arrive

* Received for publication in the Second Impression of this volume, July 8th, 1926.

until the function was almost at an end. Osler who was seated with his back towards the door turned on my entrance and jocularly enquired: "Was it twins?"

This was my first personal introduction.

The following July I attended the annual meeting of the British Medical Association at Oxford. One morning while at the section on Medicine, Osler entered and seated himself on the bench beside me. I reminded him of our meeting at Dr. Birkett's. Instantly raising his hand to his mouth and in his familiar happy manner, he whispered: "O yes, you're the fellow who knows how to manage the after-coming head."

At this meeting there was held at the Sheldonian Theatre a special Convocation for the conferring of honorary degrees upon distinguished members of the Association. Among those presented were Sir William McEwen, Sir Clifford Allbutt, Sir Jonathan Hutchinson, and Osler. A brilliant assemblage packed the hall from floor to ceiling. Osler was the last to receive the degree, and as he stood alone, resplendent in the Oxford gown, he looked a veritable youth. The enthusiasm of the audience knew no bounds. The ovation he received was tumultuous, eclipsing all that had gone before—a marvellous expression of the honour and esteem in which he was held.

The last occasion on which I saw him was during the week just previous to the outbreak of the War, when the annual meeting of the British Medical Association took place in Aberdeen. In proposing the toast to Sir Alexander Ogston, the President, at the Association Banquet, he made an eloquent and witty speech in which he paid a fitting compliment to Sir Alexander as "one who had the art of growing old gracefully."

We shall not see his like again, and we endorse the sentiment so well expressed by Marian Osborne, "most Christ-like in his life and the most God-like in his attributes."

His thoughts, his language, his wide-reading, his catholic tastes, his religious earnestness, his industry, his scientific attainments, his humanity, his kindly disposition, and his utter unselfishness—have ever appealed to me.

He has always been my beau-ideal—a concrete example of all that is best and noblest in the profession of Medicine.

"His life was gentle, and the elements
So mixed in him that Nature might stand up
And say to all the world, 'This was a man'."

REMINISCENCE FROM BALTIMORE AND OXFORD PERIOD

*Some Personal Recollections of Sir William Osler and his Influence on Students of Medicine.**

Lawrason Brown, M.D.

Saranac Lake, N.Y.

As an Undergraduate

I FIRST saw Dr. Osler in the spring of 1895. It had been decided that it would be a good thing to set before the senior class of the Johns Hopkins University during its exercises in logic and philosophy the advantages of the various careers open to college graduates. I can recall but two who spoke to us at that time, one, Mr. C. Morton Stewart, a large and successful coffee importer of Baltimore, the president of the Board of Trustees of the Johns Hopkins University and father of a number of sons with whom I had engaged in athletics. The other speaker was a rather small man with a dark complexion, black eyes, black hair (whose retreat had emphasized a striking brow), faultlessly dressed in a dark frock coat, light trousers, a standing collar with flaring points. He walked to the desk with a quick, active step, not uncommon among those with alert minds and taut muscles. I imagine the lasting impression he made upon me was due to the fact that during my college course I had sailed a sea of vagaries as far as preparation for my future career was concerned. First I knocked at the door of the profession of civil engineering but, lost among the mazes of higher mathematics and charmed by the experiments of chemistry, I forsook my previous love for chemistry. During my second year of chemistry I began biology, which fascinating pursuit led to study at a marine laboratory at Beaufort, North Carolina, for I was to become a biologist. Here, contact with Professor Brooks, the teacher of one generation of American biologists; with Professor H. V. Wilson of North Carolina, and with Professor E. B. Wilson of Columbia, clearly demonstrated to me that my mind was not sufficiently brilliant to compete with such intellects and I determined to pursue the Muse of Medicine, who I thought was easier won. With this outlook on life and knowing less of medicine than most of my associates, I listened with rapt attention to Dr. Osler's fifteen minute talk. He pointed out to us in graceful, delightful but forceful language what the career of a physician offered to serious students. He spoke at length of the tremendous influence of the family physician; how, knowing the individual from birth, he was often acquainted with his idiosyncrasies and those of his family, so he could advise, caution, restrain, urge, in such a manner that the tenor of life was put on a higher plane and possibilities arose that without his counsel would have remained impossibilities. His influence for good was thus incalculable. I have always associated Dr. James Carey Thomas, a Quaker, a family physician of the old school, a trustee of the Johns Hopkins University, the father of Dr. Harry Thomas

*Address delivered at the Inaugural Dinner of the Osler Club, Saranac Lake, N.Y., December 9, 1925.

and a power for good in the community, with this address. Dr. Osler may have mentioned him. Dr. Osler's forceful manner, his delightful personality, were such that many of us felt the suggestiveness of his speech, which made a deep impression upon me.

I next recall him at a meeting of the medical society at the hospital (J. H. H.), held that evening in the medical library. It was my first year in medicine and I had stolen in to listen to a paper on a disease of which I had never heard and whose name, actinomycosis, I could not even pronounce, a point that Dr. Osler later laughingly remarked upon.

The Clinique Intime

My name unfortunately was at the head of the alphabetical list of the class and when, early in the fall of 1897, I was the first man "up" in the third year clinic I was anything but at my ease. The room was nearly square. On one side, between two doors leading into the dispensary, stood a plain deal table with two chairs behind it. Just before it was a rattan couch with the head at the table and the foot extending out into the room. About this we ranged our chairs in a semi-circle, never more than two deep, so that every one had an excellent close view of the patient. It was an intimate clinic. Sharp on the appointed hour the Chief, as every one called Dr. Osler, walked rapidly into the room with a stream of attendants following carrying hat, coat, cane, papers. He consulted for a moment Dr. McCrae, now Professor of Medicine at the Jefferson Medical School and then the fateful moment for me arrived. A patient was brought in, a young lad as I recall, and I was called to the front in fear and trembling, for I knew singularly little medicine even for a medical student. I can clearly remember how easy he made it for me. A microscope stood on a table at the side of the room, and after some questioning of the patient (he had already been examined), I was invited to say what I saw. I recognized a leucocyte containing some pigment granules. "In this latitude," he asked, "what do pigment granules mean?" I did not know and he told us, "Malaria, always." Never afterwards did we forget that a positive blood examination must precede such a diagnosis.

He met us at these clinics twice a week. Once a month we had a "round up" at which some student would quickly review all the cases of the month. Frequently he would assign to some one of us a topic to be looked up in the library. One instance remains clearly in my mind. A case was presented with a tumour on the wall of his chest. He asked us the possibilities and told what occurred to him. Some weeks later he showed us the specimen, actinomycosis, which had been diagnosed at the Hebrew Hospital across the way by Dr. John Ruhräh. To Mr. S. fell the task of getting up a five minute talk on actinomycosis. When he read it to us the following week Dr. Osler exclaimed: "You have forgotten to mention my old friend Israel!" We all felt sorry for S. When we purchased Israel on actinomycosis last year for the Trudeau library the incident came back to me.

During the clinique intime of our third year one of my cases was a girl with a purpuric rash. He spoke for some time upon hæmophilia and I supposed in my ignorance that this was the diagnosis. Later in private when I was reporting to him my efforts at tracing the case he told me that it was a case of purpura. A case of polythelia occurred

and Mr. O. was sent through the wards to see if he could discover any more cases or, indeed, any of polymastia. His findings were reported to us later. No one was ever allowed to take more than five minutes. He was anxious for each of us to learn how to use the *Index Medicus* and the Surgeon-General's Catalogue, and frequently referred us to them. His references to the historical side of medicine adorned his teaching and enforced his points. Of Mr. Joseph Hopkins, a nephew of Johns Hopkins, he always spoke as St. Joseph. Many an interesting repartee passed between him and some of the old Irish patients. He was greatly amused when one patient told him that she did not want to see him but the professor, indicating Dr. Frank Smith, then in charge of the dispensary. His handling of the patients was never rough, never like that of some of the men who had worked elsewhere. He could not have been more considerate of them had they been private patients. He was rarely absent and never late. I can see him now sitting on a corner of the table, swinging one foot, contemplating the patient and talking to us. Even in our third year we began to find reprints from Dr. Osler in our boxes at the post-office and I remember with what joy I took them out and devoured each one.

The Health of the Student

Osler took a keen interest in every earnest student. In fact he was so anxious to befriend every one of them that on one occasion the class thought that he had intimated to thirteen men that he believed they would each have one of the twelve places which would soon be open. Those who fell ill he often followed with cheerful notes. He wrote me during the winter of 1898-1899, when I was laid on the shelf in Saranac Lake, as follows:

"Greetings! and best wishes for your pulmonic health! A nephew, Rev. H. C. G., of Toronto, has just developed tuberculous laryngitis eight weeks' duration. No trouble evident in lungs—condition good—no fever but bacilli found. I wish him to go to the Adirondacks at once. I have written Trudeau asking about the Sanitarium's private rooms, but I thought it would save time to ask you to let me know of some good boarding houses—with prices, etc. Love to Oliver—I hope you are both on the primrose path!"

One of my class-mates had preceded me to Saranac Lake with a massive infection of the lung. He had taken a bicycle trip to the Valley of Virginia after the school had closed and had returned with some fever and a slight cough. Another classmate brought him to the hospital. Dr. Osler, I am sure, was away at the time and Dr. Thayer saw him a few times before he left for his vacation. A diagnosis had been made of typhoid fever with bronchitis and he was put upon the restricted diet in vogue at that time. On Dr. Thayer's return, he promptly recognized the extensive and intensive pulmonary involvement and sent him to Dr. Trudeau. He had been a brilliant student, had always led his classes and his family had sacrified everything for his career. He had in all probability been doomed from the outset of the disease for I am certain that it was one of those cases, very unfortunate for every one connected with them, where the process begins deep in the lung and only after some weeks do physical signs appear. The family always thinks and feels that an unnecessary mistake has been made. Those of you who have begun the practice of medicine since the wide-spread use of the x-ray can never know the anxiety that such cases awoke.

Many mistakes were absolutely unavoidable, due, as I said before, to the limitations of our art. I can never recall that the patient criticized anyone but he wondered why the interne, who saw him daily during Thayer's absence, did not examine his lungs instead of discussing Thackeray. It should be noted that as soon as Thayer returned from his vacation the diagnosis was made. I have thought it best to give the details as Cushing has mentioned the instance quite frankly. The patient was given his examinations at Saranac Lake, passed them and practiced for a while until he received the summons to the immortal realm.

Amphitheatre Clinics

Once a week we had a more formal amphitheatre clinic. Here the third year class was relegated to the back seats, for the fourth year, from which the medical clerks were drawn, who presented the cases, sat in front. Throughout the two years I attended these clinics Dr. Osler presented cases and emphasized over and over again the importance of typhoid fever and pneumonia. Each year two men were selected to keep a list on a blackboard in the amphitheatre of all the cases of these two diseases and their outcome. It fell to my lot one year to tabulate the pneumonias. We saw that year thirty or forty cases.

Ward Work

During the fourth year we were assigned to the wards as clinical clerks and took histories, examined blood, urine and performed other duties under the internes. We each had to work up the cases in turn. When your case came in the night before rounds, you had to make an early start for at the tick of nine Dr. Osler was at the door of the ward and all work stopped. You were called upon to give the history and your diagnosis. He never thoroughly examined a patient during ward rounds but from what he had heard and possibly from what the resident had told him knew what the case was, emphasized the essential data, and used all the time in teaching. I remember one of the class missed the mark and wandered off on a long detailed statement of little importance. He insisted on punctuality and brevity. As we trooped through the corridors from one ward to the next, he would lock arms with some one, as often as not with a student. One day while walking with me in this manner, he said: "Brown, we ought to bleed you once a month." This was ápropos of the fact that six weeks after my return from the Adirondacks I had had a series of hæmoptyses and had been in the hospital for two weeks. Dr. Osler had come to see me in the ward, had sent me apples, and had told me that in his opinion I might finish my year and course. On the other hand Dr. Welch had sent me word not to tarry but to go instanter to Saranac Lake. Dr. Trudeau sided with Dr. Osler and I remained without further mishap. He later advised me to let no one examine me, advice which I have scrupulously followed. Can you wonder that we loved him? I often thought who was I that he should take so much interest in me.

While we were clinical clerks in the medical wards we went every Saturday night to his home where we discussed any interesting cases of the week, listened to a charming talk on some old master of medicine by the Chief, were shown most of his works in first editions and finally had pleasant intercourse served with cheese, crackers, cigarettes and

beer. At the end of the clerkship he invited all of us to dinner at his delightful home and set before us, inhabitants of the Broadway and Jackson Square "hash" houses, a meal, whose mere contemplation made us salivated. Time and again I was struck with how fully he practiced what he preached in regard to food. I wondered how he could eat so sparingly of such delicious food.

Dr. Osler delivered an address to our class at the graduating exercises. He spoke briefly on faith in medicine. Never forget, he warned us, that faith in the physician is more potent than many drugs. In fact it is often the faith in the doctor that produced the effect attributed to the drug. In his later writings you will find this subject delightfully amplified.

In the summer of 1901 Dr. Trembley had decided to resign as resident of the Sanitarium and I was to have his place. I was at a loss as to where to get an assistant and turned to Dr. Osler. In July (the 23rd) he wrote me:

"Dear Brown: You will not find it easy I fear to get an assistant unless he is a healed 'lunger.' I do not know of the right man at the moment but I will bear it in mind. We are having a delightful meeting (Congress of Physicians and Surgeons), only we miss Trudeau sadly. So many inquire for him and speak of his work. So glad that you are going to take charge of the sanitarium. The outlook for you should be first-class. Love to Dr. Trudeau."

The Laennec Society

Tuberculosis had always interested Osler. In 1900 the death rate in this country was about 300 per 100,000 and it was indeed as he called it, "The Captain of the Men of Death." Few were interested in it from any point of view and to combat this attitude, no doubt, he formed the Laennec Society to study the disease. I shall never forget the pleasure his invitation to read a paper before the Society gave me. I was invited with several others to dine at his house the night of the meeting. On the way to the hospital tuberculin was discussed and I asked him how it was that so many men in Europe got results that I could not get. His reply was that they did not get them. He discussed my paper on diagnosis in a way most gratifying to me but after the meeting, in private, called my attention to a point that I had overlooked. He had his knowledge ordered in a way that was truly uncanny.

Osler at Saranac Lake

One day a small, rather forlorn, youngish man, who looked browbeaten and hen-pecked, drifted into my office. He was a Cornishman but had married while living in New Jersey. Falling ill, his wife had literally turned him out of the house. He was desperately ill, and his funds ran short. He then communicated with Dr. Osler, a very distant cousin, who came to his relief at once. Time and again he wrote me to spare no expense about Mr. Osler; "do all you can for the poor chap and if there is anything extra needed let me know. I have not met him but his father and mine were first cousins and I would not wish him to lack anything." And again; "Please do anything you possibly can for Jonathan Osler. If he needs anything extra or should require a special nurse, have anything you think fit for him and send me a memorandum." In gratitude he made over to Dr. Osler his small life insurance, which

he in turn, later on sent to different persons in Saranac Lake who had been kind to the poor chap. "Please accept the enclosed cheque for $50.00 for your kindness in looking after Mr. Jonathan Osler. I have added a dollar for the expense in connection with the insurance papers. I have sent Miss Hoerner and Mrs. Walker each a little present and have sent Miss Prescott $100.00 for her building fund." It was to see him primarily that in 1902 Dr. Osler stopped in Saranac Lake on his way south from Canada. Of course he had to see the Sanitarium. I showed him the records and tapping them he remarked: "Unless a man has his experience in this form, he is unable to discuss it intelligently." It may be of interest to note that shortly after this Dr. Trudeau, who had always trusted his wonderful memory, began taking a few notes on patients. Dr. Osler had, of course, to see my few old books. He took out Noah Webster's *History of Pestilential Diseases*, remarking that it is the best medical work ever written by a layman. He spied Samuel G. Morton's *Studies on Consumption* and said as far as he knew he was the only student of Laennec from America. He pointed out in the preface the statement that the author studied under the great Laennec.

The Outdoor Life

One day, in 1904, I received the following letter:

"Dear Brown: I inclose five dollars for five subscriptions to the *Outdoor Life*, the addresses to which they are to be sent being given below.

1. Dr. Wm. Osler, 1 W. Franklin St., Baltimore.
2. Library of the Med. and Chir. Faculty, 747 No. Eutaw St.
3. Miss Adelaide Proctor, 47 Green St., Cumberland, Md.
4. Mrs. John J. Gibson, Room 1220, N. Y. Life Bldg., Chicago.
5. To someone who you think would enjoy it."

I had started the little journal despite many predictions that its birth would be quickly followed by a sleep and a forgetting. I had written to Dr. Osler asking if he could not give us a few words on Fracastor for he had recently mentioned him as being the first to call attention to the contagiousness of tuberculosis. In July, 1904, from Pointe-a-Pic at the mouth of the St. Lawrence I received the following letter and inclosure:

"I inclose you a little memo of Fracastorius on the contagiousness of phthisis which may be of interest enough to put in your useful paper. It was nice to see Trudeau looking so well. I leave for England on Saturday the 16th by the *Campania* from New York. I hope you will have a good summer. Do not overwork. You must get a good holiday in Europe. Wm. Osler."

The MS. in his own handwriting suggests very strongly that he translated and wrote out the passage from *De Contagione* concerning the contagiousness of phthisis. (I have here the article and book of Fracastorious, I believe, a first edition). Had I known then what I know now in regard to how busy he was I would never have had the temerity to ask him for anything from his pen.

In 1908 I had made my plans to go abroad and had written to Dr. Osler to that effect but a patient reached Saranac Lake who urged me to postpone the trip, saying if I got him well he would send me over and pay all my expenses. I was sure that under such circumstances he would die. I wrote this to Dr. Osler and on October the 15th he replied from Paris:

"Congratulations on the tuberculosis number of the *Outdoor Life*—excellent, and Trudeau's introduction is fine. Give him my love. I am sorry not to have been with you all, but as I dare say you have heard, I am off for a long holiday, first here for three months and then on to Italy. When are you coming over—do not delay. You need a good rest and you deserve it. I hope to be out in May. Nothing here has begun, so I am devoting myself to the libraries. How is your collection getting on? It is nice to see that the *Journal* has been so successful. You must often be hard put to for contributors. I feel like a pig to have failed you but I have been over head and ears in work—chapters for Allbutt's System, my text-book and my own system. I hear very nice things said of your article over here. Love to all my old friends."

The National Tuberculosis Association

By the formation of the Laennec Society he had aroused interest at the hospital (J. H. H.) in the tuberculosis problem, but he clearly saw that the physicians alone could never overcome the disease. To awaken the general public and to gather in Baltimore those who were interested in the subject, he arranged the first tuberculosis exhibit in America, if not in the world. Among other things he had a collection of first editions of the great works on tuberculosis. The walls of McCoy Hall were covered with charts and Knopf's "Tuberculosis and the Masses" was in a frame in twelve or more languages. Ravenel in discussing this part of the exhibit ventured into the domain of the ornamental with marked success. There had been two supposedly national bodies organized for the discussion of tuberculosis and on the last afternoon a meeting was held to decide whether to join them or to organize a new body. The discussion waxed rather warm when a member (Dr. Bell) of one of the other organizations called Ravenel a horse-doctor. A committee was finally appointed with Osler a member. This was the beginning of the National Tuberculosis Association, which was organized in 1904. He was for years a vice-president and honorary president.

Over the mantel at 1 W. Franklin Street, where he lived in Baltimore, hung the photograph of a full suit of armour. It served, as Mrs. Osler told me, a very useful purpose. Whenever any one asked him a question which he did not care to answer, he referred in a cheerful way to the figure in armour.

The System of Medicine

In 1906 it was noised abroad that Osler was going to write a system of medicine and great was my elation when I was asked to write the clinical section on tuberculosis. Baldwin was given etiology and MacCallum pathology. Dr. Osler wrote asking for an outline or schema and I have now the copy with his annotations on it. As I had followed very largely his different plans (he wrote the section on tuberculosis in Loomis' *System*) he made few alterations. I wrote too much and overfilled the space. The publishers protested and Osler wrote me as follows:

"I am sorry about the condition of plethora of your article. I am afraid we must agree to Lea's request and cut it down as near as possible to the space they assign. I know how hard it is to do this, but it is surprising how much may be done by cutting out reduntant words and sentences. For example, I cut out nearly four lines to the printed page from one edition of my text-book simply by condensation. It is, of course, a great aggravation and it is often harder to boil down than to write." And again: "I am so sorry to hear

from McCrae that the Leas insist upon cutting down still further your article. It is too bad but we have no option in the matter as Lea & Company insist that the volume must be kept to the original estimate of number and size. I shall look over the proofs of your article with great interest. M. says that it is A1 as I am sure it is. When are you coming over? Give my love to Trudeau and to all good friends there. What a success the *Journal* has been!"

The task was a bit trying as I had overwritten my space by about 30,000 words!

Oxford

The impulse to get in touch with Dr. Osler as soon as I reached London in November, 1909, was irresistible. Immediately I received the following note:

"Dear Brown:—I am delighted to know that, at last, you are on this side. Could you not come down to-morrow with me? I have to be in town at the Inter. Med. Society Committee and will take the 7:30 train from Paddington. Will you join me there? We can dine on the train. It would be nice if you could stay a few days with us and see something of Oxford. Wire me in the morning if you cannot come."

It is needless to add that I accepted the invitation and joined him at the station. He and Mrs. Osler were always apparently delighted to see you, though many times it was impossible for me to see how they stood the constant stream of visitors, who literally were unable to remain away. As hosts I have never seen quite their equal, for those who stayed with them seemed to become a part of their family. The house was spacious and full of books. When I was there the only books in the dining room were a set of the *National Biography*, to which not infrequent reference was made. Later shelves and books overflowed even into this room. At 1 W. Franklin Street, when you dropped in for tea you would as likely as not find on a chair a copy of an *editio princeps* of Galen, of Avicenna or of Hippocrates. He was one of the directors of the Oxford University Press and for this reason received a copy of every book published by them. These in part he passed on to those he imagined would appreciate them, for his thought for others knew no limits. I never left without carrying with me one or more books which I greatly prized. He always sent you to bed with a book to read. I saw the Bodleian Library under delightful circumstances and stood in reverence before the wonderful collection of the many editions of Robert Burton (some belonging to Dr. Osler) which, together with many of Burton's own books, had been collected in one compartment of the shelves, surrounding a portrait of the author of the *Anatomy of Melancholy*. With such a guide Christ Church College was a revelation. We visited his rooms, where he said that I could be put up any time the house was full. The dining hall with its wonderful pictures was a great source of pleasure to him. At his patience with my ignorance and his desire to teach me new things I often marvelled. He truly loved to teach. When I left he gave me letters to the curators of the Royal College of Physicians and Surgeons, to Hurst, to Rolleston, to Rist, to Widal, to Wassermann (which I never presented) and to the delightful family of Professor Ewald in Berlin. In Paris he suggested that I go to the Hotel Louvois and taught me to say "Hotel Louvois, Place Louvois, vis-á-vis la Bibliothèque Nationale." I got there without mishap. It was natural that I

should ask him the best way to learn French and he answered: "I have heard that the best way was to acquire a sleeping dictionary." In discussing affairs in England, he told me that in his opinion disestablishment of the Church would have sooner or later to come. He was struck by how little the English knew about America. "A few days ago," he said, "I was at a meeting of the.....trustees and not one of them had ever heard of Tiffany's."

Paris

Six months later I was going down stairs one day in the Hotel Louvois and whom should I meet but Dr. and Mrs. Osler, a niece, and the daughter of an old friend. A rare treat was in store for me. For two weeks I played with him about Paris. We ransacked Boulange's old book shop. "Have you Empis?" he asked and I was told that this work on "granulie" was a classic. One morning we drove to one of the northern boulevards in search of a first edition of Ambroise Paré but it was not there. After browsing among old books for some time we repaired to one of the open-air cafés on the side-walk and had some liquid refreshments.

Another morning he took us (Dr. Henry Barton Jacobs and me) to a concourse for the professor agregée, a subprofessorship without a teaching position, through which all who seek academic honours in France must pass. The court of the École de Médécine was filled with gendarmes with fixed bayonets and in the amphitheatre they outnumbered those in attendance on the examination. A short time previously the students had protested against the methods of examinations and as the candidates could not be heard the dean, Dr. Landouzy, remembered for his work on tuberculous bacteremia, attempted to announce that the meeting was adjourned but his words were drowned in shouts and he turned to write what he had intended to say on the blackboard. This he found plastered with the remains of eggs and tomatoes. He finally wrote on the black velvet covering over the desk. On the day of our visit the candidate was immolated in a lectern, high above the heads of the audience. Dr. Osler listened attentively and remarked later that the candidate had omitted but one point in his written paper which dealt with some form of paralysis.

Again we visited and made ward rounds with old Professor Dieulefoy (of aspirator fame), who drove up to the hospital in a stylish barouche with a spanking pair of bays. On arriving in the ward he removed his frock coat and put on a heavy overcoat with a linen coat over this. "He does this," Dr. Osler whispered to us, "even in the middle of summer." He showed us some cases of chronic ulcers which he was treating with super-heated dry air, with, he claimed, good results.

It was not all work and one day we visited Notre Dame Cathedral. As we passed along the south aisle to look at the rose windows, he spied a box marked, "For those in purgatory." He dropped in a franc or two, saying that he had many friends there. Another evening we dined with the Jacobs at the Ritz and then went to hear Mary Garden sing at a benefit performance.

We had planned to go to see Rostand's *Chantecleer* and in the morning one of the girls had asked me if I would go to Maxim's with them after the performance. "Is Dr. Osler going with you?" I replied. He was, she said, and I consented to go. At dinner one of the girls appeared

with a hat, the other without. After dinner she took hers off and the party at Maxim's was off. Dr. Osler put Mrs. Osler with me in one taxi and he and the two girls took another. "He has acted like a spoiled boy. He would not talk all during dinner," she said to me as we drove to the theatre, where I must confess I understood little or nothing of the barnyard talk that drifted over the footlights. Mrs. Osler of course was perfectly right but as far as the girls were concerned they knew nothing of the sort of people that frequented such resorts and even after a supper there I doubt if they would have been any the wiser.

On their return to Oxford I accompanied them. When there I received a picture of himself engaged in writing his text-book. You will see an amusing incident of this in his Life. I could not resist a first edition of *Through the Looking Glass* at an old book shop in Oxford, for Dr. Hodgson had been a fellow at Christ Church College where, as I have said, Osler held his fellowship. Early in my career I had bought the collected works of Sir Thomas Brown and had struggled through part of *Religio Medici*. He was Dr. Osler's favourite author and he had practically every edition of his works at that time. He showed me a lock of his hair and a bit of his shroud, if my memory serves me right. I really believe I caught the Contagio collectianæ from him and a happy infection it has proved for me.

In speaking once of a certain city he remarked: "There is Dr..... now professor of medicine, who has gotten further on one talent than any man I know." Those of you who are acquainted with his *Master Word in Medicine* will recognize at once the talent he had in his mind. I took it at once to heart.

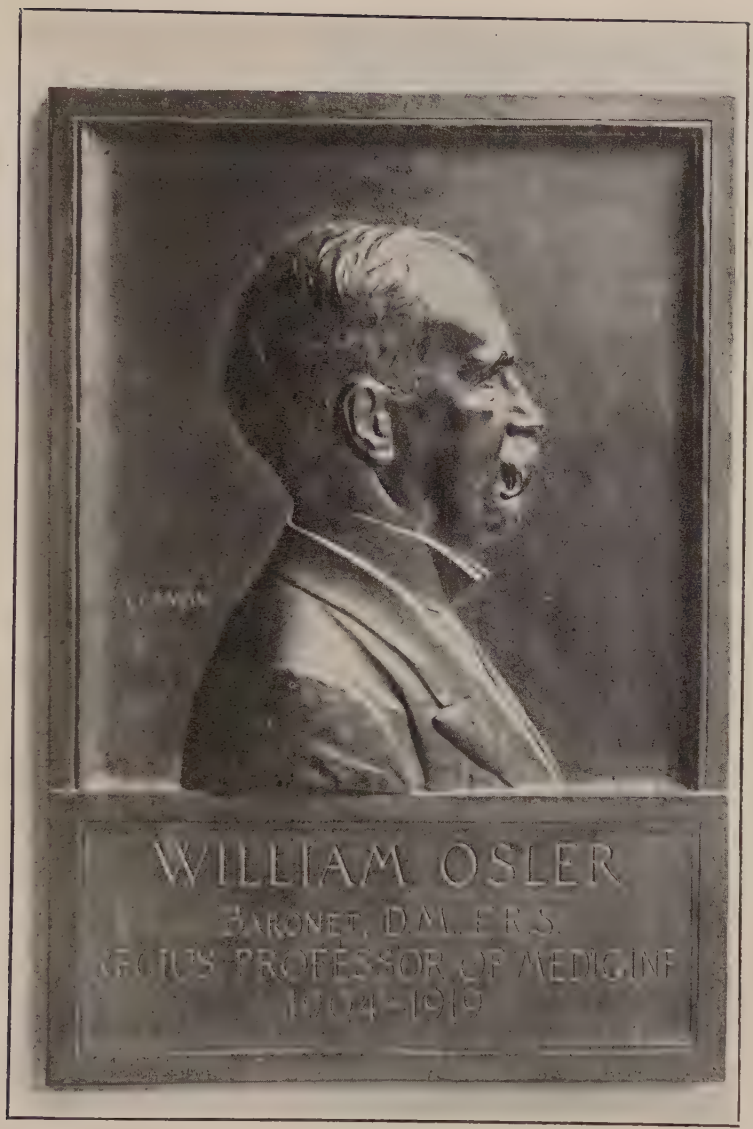
I sent him a copy of the little book I had written for patients and in return got this:

"Dear L. B.:—That is a very nice book of yours—so full of common sense and so well put. Your wife must have written it!! Greetings to you both."

Six weeks before the beginning of the World War I was motoring with some friends from Bath to Leamington and passed through Oxford. Dr. Osler insisted that I spend the afternoon and evening with them, which I did. That afternoon the house was crowded with Rhodes scholars and other students. I saw his (Osler's) treasures which were increasing steadily. He showed me the only first edition of George Bodington, (the first to use the modern hygienic-dietetic treatment of pulmonary tuberculosis) I ever saw. As usual when I left him I carried with me a book. I never saw him again.

Such are my recollections of Osler, the peer of teachers of the last generation; the quickening influence of every community in which he dwelt; generous to a fault of his time, of his strength, of what money he had in building up libraries, in assisting his professional brother, or in aiding the beggar at his door, and to his dying day the friend and helper of every earnest student of medicine.

In Memoriam



Bronze memorial plaque by Monsieur Vernon of Paris, unveiled in the court of the University Museum at Oxford, June 10, 1925

The memorial in the court of the University Museum at Oxford, showing the bronze plaque of Osler placed beside the statue of Sydenham, and the wreath below it deposited during the summer of 1925 on behalf of the American Interstate Postgraduate Association.

THE SIR WILLIAM OSLER MEMORIAL AT OXFORD

The three fine illustrations of the Sir William Osler Memorial in the Court of the University Museum at Oxford are reproduced here through the kindness of Sir Archibald E. Garrod, K.C.M.G., F.R.S., Regius Professor of Medicine, from prints kindly made by Mr. Robinson, Assistant Secretary to the University Museum, from photographs taken by him at the time when the Plaque was unveiled. The wreath shown below the memorial was deposited on behalf of the Congress of the American Interstate Post-graduate Assembly of medical men then on a visit to England. The Plaque is in close proximity to the full-length statue of Sydenham.

THE UNVEILING OF THE OXFORD MEMORIAL*

LYDIA S. HENRY, M.D., Ch.B., SHEFFIELD

Montreal

IN the Court of the University Museum at Oxford can be seen a bronze plaque in memory of Sir William Osler, late Regius Professor of Medicine. In its near proximity stand the figures of other pioneers of Medicine. The plaque is the beautiful work of Monsieur Vernon of Paris and is a replica of that made for the Faculty of Medicine of Maryland, U. S. A.

The unveiling of the above by the Vice Chancellor, Mr. Joseph Wells, M.A., took place on June 10th, 1925, in the presence of Lady Osler and a distinguished gathering among whom were many of his colleagues who came to do homage to the great leader of medicine. In presenting the plaque, Sir Herbert Warren, President of Magdalen, expressed appreciation on behalf of the subscribers to the Sir William Osler Memorial Fund.

In accepting the memorial for the University of Oxford, the Vice Chancellor paid fitting tribute to the charm and inspiration of Sir William's remarkable personality. Sir Humphry Rolleston Bt., President of the Royal College of Physicians and Regius Professor of Physic in the University of Cambridge referred to the infinite variety of Osler's work and to his wide activities in the different realms of Medicine. He dwelt on the influence of Osler's life, his personal charm, his human sympathy and his happy vein of persuasive enthusiasm which fitted him so admirably as a great leader in campaigns for the prevention of disease.

It is interesting to note that the First Quinquennial Award of the Bronze Medal to the Oxford medical graduate who shall have made the most valuable contribution in the science, art, or literature of medicine, has been awarded to Sir William Osler's successor as Regius Professor of Medicine and Student of Christ Church, Sir Archibald Garrod, K.C.M.G., F.R.S., D.M., F.R.C.P.

The residue of the income of the Fund may be used at the discretion of the members of the Board of Awarders resident in Oxford in making grants from time to time to teachers in the Oxford Medical School, recognised as such by the Board of the Faculty of Medicine, to enable them to pursue some special study connected with medicine outside the University.

* Extracted from the accounts in the *British Medical Journal* and *The Times*.

BRIEF REPORT OF THE EXERCISES IN CONNECTION WITH THE PRESENTATION OF A MEMORIAL PLAQUE OF SIR WILLIAM OSLER TO THE JOHNS HOPKINS HOSPITAL ON JANUARY 19th, 1925.

IN 1923 Dr. Thomas McCrae, Professor of Medicine, Jefferson Medical College, Philadelphia, suggested that a suitable memorial should be installed in the Johns Hopkins Hospital to commemorate Sir William Osler's association with the institution. A Committee consisting of Drs. L. F. Barker, W. S. Thayer, H. B. Jacobs, T. McCrae and T. B. Futcher was chosen to arrange for such a memorial. Invitations to subscribe to a fund, with this object in view, were sent out to fifty of Sir William's professional associates during the period he occupied the Chair in Medicine in the Johns Hopkins University. Dr. R. Tait McKenzie, of the University of Pennsylvania, a graduate of McGill University, and a former student of Sir William's, was commissioned to design a suitable bronze plaque.

The formal presentation of the plaque to the Hospital took place on the evening of Monday, January 19th, 1925, at a special meeting of the Johns Hopkins Historical Club, which was held in the Medical Amphitheatre, with Dr. Howard A. Kelly, President, in the chair. Those who had subscribed to the fund were entertained at dinner at the Maryland Club before the meeting, as guests of the memorial committee.

The exercises were very delightful and the spirit of Sir William seemed to pervade the atmosphere. After a few appropriate introductory remarks by Dr. Kelly, the President of the Society, Dr. Henry M. Hurd, the first Superintendent of the Johns Hopkins Hospital, was called upon and related his early personal recollections of Sir William, which dated as far back as 1884, when the latter was the energetic Secretary of the Canadian Medical Association Meeting held at Kingston, Ontario.

Dr. Rufus I. Cole, a former student, and Director of the Hospital of the Rockefeller Institute, New York, read a charming

Published in this Volume, pp. 46-51.

paper on "Sir William Osler, Teacher and Student,"* in which he said "Time can only reveal which of the various channels through which flowed his great personality were cut most deeply and permanently, but it seems most likely that it was as a student and teacher of medicine that he made the greatest impression on his time and that it is through the results of his teaching, transmitted through the medium of his students, that his effect on posterity will be most significant."

Dr. William H. Welch gave a delightful informal talk on "Osler: Student and Teacher of Disease," in which he emphasized what Sir William had stated in his last address delivered in this country on the occasion of the complimentary dinner given him in New York, before his departure for Oxford in 1904; that there were two great ambitions in his professional life. One was to become a good clinician. The other was to build up a great clinic along lines different from those hitherto followed in this country or in England.

The formal presentation of the bronze plaque was made on behalf of the subscribers by Dr. Thomas McCrae, of Philadelphia, who gave a delightful address, emphasizing the lasting influence that Sir William had exerted on the teaching of Medicine and on Medical Education in this country.

The plaque, which is temporarily placed on the walls of the Medical Amphitheatre, which is so closely associated with Sir William's activities as a teacher, but which is later to be appropriately located in the new Osler Clinic, was unveiled by Mrs. Thomas McCrae, one of three nieces of Sir William present, the others being Mrs. A. C. Abbott, of Philadelphia, and Mrs. H. P. Almon Abbott, of Baltimore.

On behalf of the Trustees of the Hospital, the plaque was accepted by Judge Henry Harlan, President of the Board, in a gracious speech.

The proceedings closed with a few remarks by Dr. R. Tait McKenzie, of Philadelphia, who designed the plaque.

THOMAS B. FUTCHER

Baltimore

MEMORIAL PORTRAIT MEDALLION

of

SIR WILLIAM OSLER

(For Johns Hopkins Hospital)

The bronze medallion portrait of Sir William Osler for Johns Hopkins Hospital is life size and framed in oak. Around the border is the inscription "William Osler, Physician-in-Chief, 1889-1905," in raised letters.

The moment of the pose is during a clinical lecture and the attitude is one he often assumed, his right hand resting on his hip, his left hand toying with his faithful microscope on the table before him. The instrument is modelled from an old fashioned Zeiss he himself used at the Philadelphia General Hospital. His head is lowered as if he were speaking in that half reminiscent way that distinguished his clinical talks from the more formal lectures. Behind the microscope is a row of books and beneath the table top is the incised inscription "A tribute from his associates and assistants at Johns Hopkins."

R. TAIT McKENZIE

MEMORIAL PORTRAIT MEDALLION
of SIR WILLIAM OSLER

by

R. TAIT McKENZIE

FOR JOHNS HOPKINS HOSPITAL. THE GIFT OF HIS ASSOCIATES AND ASSISTANTS AT JOHNS HOPKINS

{ *Published by permission of the Committee* }

THE UNVEILING OF THE OSLER MEMORIAL TABLET AT THE MONTREAL GENERAL HOSPITAL

MARGARET OWENS, M.B.

Montreal

ON May 27th, 1925, in the presence of a large gathering of doctors, nurses, and friends of the Montreal General Hospital a fitting tribute was paid to the memory of three distinguished medical men who had succeeded each other as pathologists to the hospital, by the unveiling of memorial tablets to:

SIR WILLIAM OSLER, BART., M.D., LL.D., F.R.S., F.R.C.P.
AUTHOR, TEACHER AND PHYSICIAN

WYATT GALT JOHNSTON, M.D.
PROFESSOR OF HYGIENE IN McGILL UNIVERSITY AND PATHOLOGIST TO THIS HOSPITAL

JOHN McCRAE, D.S.O., M.B., M.R.C.P.
PHYSICIAN, POET, SOLDIER

The tablets were presented to the Hospital on behalf of its Medical Board, by the President of the Hospital, Lieut.-Col. Herbert Molson, C.M.G., M.C. Following the dedication short addresses upon the services rendered by these former members of the staff were delivered, that on Dr. Wyatt Johnston by Professor R. F. Ruttan, Dean of the Faculty of Graduate Studies and Research, that on Colonel John McCrae by Professor C. F. Martin, Dean of the Medical Faculty of McGill University, and that on Sir William Osler by Professor F. J. Shepherd, Osler's fellow student and life-long friend.

In a few telling sentences, Dr. Shepherd gave, as only one with such associations could have done, an epitome of Osler's wonderful career and of its foundations in this Institution. He recalled the different relationships which Osler had held towards the hospital, first as a student, then as its first pathologist, then as attending physician to the Small-pox Hospital which was at that time an appanage of the hospital and lastly as attending physician in the wards.

He pointed out that it was in the wards and post mortem rooms of this hospital that most of the material for the first edition of Osler's great work *The Practice of Medicine* was chiefly obtained. It was also in this institution he first learned from the late Dr. R. P. Howard and Dr. George Ross the method of bedside teaching which he later established in the hospitals of the United States.

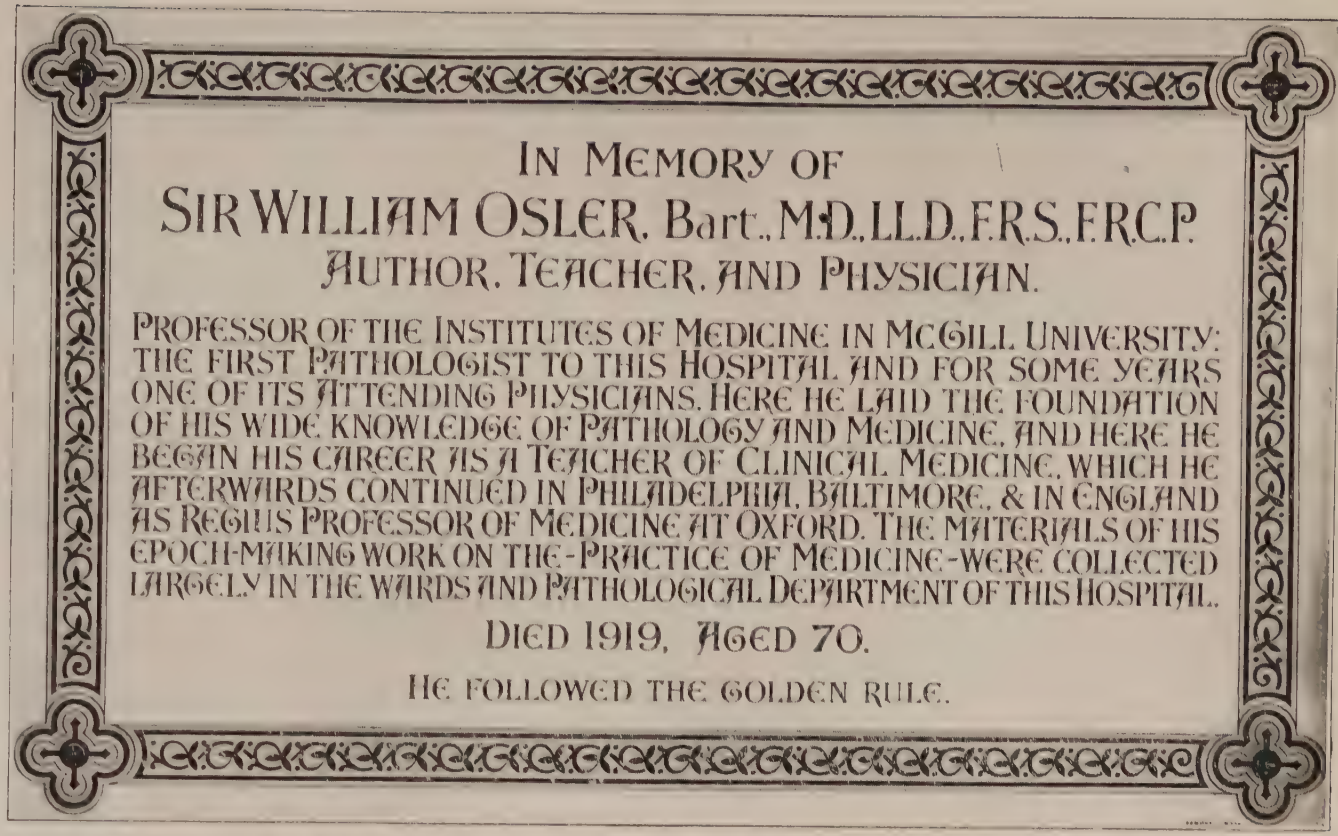
The greatest emphasis was laid on the personality of the man:

"He influenced everyone with whom he came in contact especially youths and students. He was a stimulating and reforming individual in every community in which it was his fortune to reside. A marvellous and sympathetic teacher, he had the faculty of winning the love and admiration of all who worked with him. He had a keen sense of humour, a kindly nature and a tremendous capacity for work. With his wide knowledge of general literature both modern and ancient he collected a great library which he has left to his Alma Mater, McGill University.

"It is a splendid tradition that so great a man and so great a physician once lived with us and shared and influenced our activities and set an example of humanity which all his successors would do well to follow."

The secret of Osler's life and influence is best expressed in the closing words of the inscription which this tablet bears:

HE FOLLOWED THE GOLDEN RULE


IN MEMORY OF
SIR WILLIAM OSLER, Bart., M.D., LL.D., F.R.S., F.R.C.P.
AUTHOR, TEACHER, AND PHYSICIAN.
PROFESSOR OF THE INSTITUTES OF MEDICINE IN McGILL UNIVERSITY: THE FIRST PATHOLOGIST TO THIS HOSPITAL AND FOR SOME YEARS ONE OF ITS ATTENDING PHYSICIANS. HERE HE LAID THE FOUNDATION OF HIS WIDE KNOWLEDGE OF PATHOLOGY AND MEDICINE, AND HERE HE BEGAN HIS CAREER AS A TEACHER OF CLINICAL MEDICINE, WHICH HE AFTERWARDS CONTINUED IN PHILADELPHIA, BALTIMORE, & IN ENGLAND AS REGIUS PROFESSOR OF MEDICINE AT OXFORD. THE MATERIALS OF HIS EPOCH-MAKING WORK ON THE PRACTICE OF MEDICINE WERE COLLECTED LARGELY IN THE WARDS AND PATHOLOGICAL DEPARTMENT OF THIS HOSPITAL.
DIED 1919, AGED 70.
HE FOLLOWED THE GOLDEN RULE.

THE MEMORIAL TABLET TO SIR WILLIAM OSLER IN THE MAIN CORRIDOR OF THE MONTREAL GENERAL HOSPITAL

THE OLD DUNDAS RECTORY

Enlargement from an old photograph of Sir William Osler's home in Dundas. His father and mother are on the porch, also two of the boys. Presented by Dr. Thos. A. Bertram, Dundas, for illustration of Dr. Mullin's article.

The house is on the south side of the road from Hamilton to Dundas, and faces the north, and from it there is an excellent view of the whole Dundas marsh, through which the old Desjardins Canal was made, east to the Bay. Almost immediately across the road from the rectory there is a small park, from which there is a pathway leading to the marsh, and this is in all probability the path taken by Osler and Johnston in their peregrinations. It is here, on this path, that the Hamilton Medical Society purposes erecting a memorial marker.

An Epilogue

THE HAMILTON MEMORIAL FOR WENTWORTH COUNTY

J. HEURNER MULLIN, M.D.

Hamilton, Ont.

TO many, who have thus far followed the footprints along the pathway of Osler's life, the question will have arisen,—"How can we carry on?" Those who have had some share in the gathering of material for this volume feel that a short reference should be made to a proposal, which, while local in its character, may eventually prove to be far-reaching in its effect. It is too early to present definite plans or programme. Those nominally in charge of a developing idea feel yet unwilling to assemble their thoughts or present details of a programme which is yet in embryo. With the assistance of Sir William Osler's friends, we believe that it may be possible to disclose the idea and leave it to others to make possible the consummation of a perpetual memorial, which will not only visualize the life of the great teacher, but stimulate others to follow the path he trod.

Before proceeding further with our story, may we suggest that the reader review the previous sections in this volume, and in particular, that written by N. B. Gwyn, and endeavor to place himself in the environment of the early days in Dundas. We would record particularly the pioneers in medicine, whose work was centred in this village and extended throughout the sparsely settled rural community. Some of those men referred to in Cushing's biography have passed into the Great Beyond. We still hear intimate references to the two Hamiltons, Walker, McMahon and Inksetter. As the memories of these fade, Ross and Bertram come before us. Probably in no other community was good fellowship, sympathy and mutual assistance ever more continually exemplified. The character and lives of these men undoubtedly contributed to Osler's early conception of the country doctor. Both the former and latter group were undoubtedly stimulated by his personality and interest in scientific work. In addition to these, there were

other contacts made in the neighboring city of Hamilton,—Macdonald, Malloch, Mullin, O'Reilly and Osborne. Several of these men, with their Hartnack microscopes at home, endeavored to study the specimens obtained after a long pull in the white-ash breeze, in and out of the various inlets of the Bay and through the narrow channel known as the Desjardins Canal, with the junior members of their families often taken along for ballast. Even twenty-five years later the microscope was not yet in general use in practice, but these men at least made frequent use of it in their practice and hospital work. One of our members has a vivid recollection of being allowed to have Sunday dinner with young Osler during the month that he relieved an older brother as physician in charge at the City Hospital. The huge microscope in the doctor's sitting-room and other evidence of his work, made a lasting impression on this youth of nine summers. The influence of these workers undoubtedly spread to the Medical Society of the community and we hear, from some of the older members, of regular meetings and interesting discussions.

This early society dissolved, like many others of that period, partly as the result of the zeal of one vigorous and progressive idealist, of the type described by Osler in the words, "he lives often in wrath and disputations, passes through fiery ideals, is misunderstood, and too often despised and rejected by his generation." With the exception of a private medical group known as the "Dyspeptic Club," there was no other organization of the medical profession in Hamilton for several years. Dr. Alex. Osborne, a former pupil of Osler, at his farewell dinner on the eve of his departure for the Boer War, appealed to the medical profession, urging them to proceed with the formation of a new society entirely distinct from the old connections. He urged them to recognize the necessity for the suppression of personalities and academic discussions on ethical questions. Almost immediately after this, a new society* was organized and has continued until the present without interruption and is now recognized as one of the most active in the province.

When it became known, in 1906, that Osler was returning to Canada for the first time after going to Oxford, Olmsted, then presiding officer of the Society, wrote to him, asking that he address the Society at the Annual Dinner. After a cable message

*The Hamilton Medical Society.

had announced that he would be with us and that we were to have this honor, an honor rarely, if ever, conferred on such a small local society, preparations were made for a large turnout of the members and representative men from other nearby counties. Osler, as on other occasions, spent the day at his disposal looking up old friends. On the evening of the dinner, the writer well remembers driving him to the meeting in an open sleigh with a cold rain beating in our faces.

The weather made no impression on Osler. He was in the best of spirits and during the short, informal reception preceding the dinner, mixed with the assembling audience and after his usual custom, had short chats with many he had previously known, inquiring regarding personal and family relations, and had a kindly remark for each new face presented. In his address, he laid great stress on the importance of local medical organizations; he warned the members against the enticements of quick returns from rosy investments, as the medical profession were the easiest of all dupes for such seduction; and urged the members to spend what money they had to spare, after taking care of their families, first, on their libraries; secondly, on travel trips abroad; and lastly, on gilt-edged mortgages on good farm land. To the young man, he made a special appeal that he preserve his "brain pan" and develop it by post-graduate work away from home and former college affiliations. This resulted in marked development of interest shown by the younger group; several deserted their practices to complete their studies.

Some of us cherish the belief that the spirit of Osler still lingers in our midst and has had no small influence in leading our members to assume responsibilities in the affairs of the community at large, as shown by their generous assistance, on a voluntary basis, in infant welfare work during the past fifteen years, and their coöperation in a Health Survey in Dundas and the territory surrounding. This Survey was originally planned as part of the national tuberculosis movement, which, in its inception, received inspiration from Osler.

A later development of this Society was the establishment of an Annual Clinical Day in 1917. This has been carried on since then and is now attended by a large representation from the Niagara Peninsula. We have been favored by assistance from many of Osler's pupils, Barker, Futcher and McCrae, and by other

representative men from metropolitan centres. At the Annual Clinical Day of 1925, the programme was supplied by a Mayo Clinic group and Dr. Leonard Rowntree in the course of his remarks at the evening dinner presented the following:—

"To our profession, Osler has given much, improved our system of training, enlarged our opportunities for acquiring clinical experience, broadened our outlook on Medicine and contributed to our idealism. As physicians, our debt is large. For Canadian Medicine and Canadian manhood he has won the approval of the entire world. Because of his influence, the Canadian medical profession enjoys added prestige everywhere. As Canadians our debt is large.

"His absorbing passion was the development of young men. Is it within our power to continue this work? Shall we receive from Osler's hands the torch he carried so successfully for half a century, and create in his name a memorial fund for the continuation of his work, to make possible greater opportunities for young physicians of unusual promise? Is it fitting that such a fund should be started in Canada? I leave this idea with you, hoping that here in Wentworth County, so long the home of the Osler family, and in Hamilton, where Osler first began the practice of Medicine, this little seed may find fertile soil in which to grow and bring forth fruit."

Undoubtedly there was, in his hearers, a wide-spread sentiment ready to receive the suggestion. The idea has certainly fallen on "fertile soil" and many of the local group, in their waking and sleeping hours, have this proposal continually before them. There is enthusiasm throughout the whole community and especially in Dundas. Certainly this Society, which owes so much to Osler's personal influence, must, sooner or later, indicate their respect for his memory by the adoption of some type of memorial, which will continually recall to succeeding generations "who knew not Osler," the part he played in its foundation and development and in addition to this, present, periodically, at their meetings, extracts from his books of wisdom, or comments on these or his work made by others. A single memorial suggested was not sufficient for these typical individualists. We find different reactions fron different types of mind. Some of the thoughts, which have arisen and been transmitted more or less in confidence, are presented here. It should be clearly understood that these musings are not set forth as a completely thought out plan, but rather as the accumulation of flashes of inspiration gathered by the way.

The foundation of scholarships for undergraduate and post-graduate students of promise, who come from this or nearby

counties, has received the endorsation of many. Already one well known institution in the United States has offered to establish an Osler Fellowship for Canadian students. Other members of our society would suggest that the local society, as its first objective, should erect a monument or simple marker, indicating the path over the hillside that Johnson and his young disciple took on their way to the marsh in search of specimens. It should be remembered that these early expeditions resulted in the first of a series of publications of a long "ink-pot" career.* The old rectory, close at hand, is occupied by friends who treasure many personal reminiscences. Other members would organize a pilgrimage, and invite as many as possible of Osler's former students and associates to join with us in the unveiling and dedication ceremonies in connection with this memorial. Other members would set apart an annual day for remembrance and through this Society endeavor to present to succeeding generations in the county, interesting facts concerning his life work at the bedside, his literary production, and his broad conception of human affairs; still others would ask "why should not this first pilgrimage be made a notable event in the annals of Canadian medicine?" Might it not be possible that out of this assembly, there will develop an inspiration for a wide-spread and lasting memorial?

The members of the local Committee† agree that these disconnected reveries be presented in their present form, but wish it to be clearly understood that they do not wish to interfere with other activities already established to commemorate the life of Osler. They do not know whether or not the dreams pictured here should be the source of inspiration for greater undertaking.

> *"Though the dream may never be realized, the impulse will not have been wholly in vain if it enables us to look with sympathy upon the more successful efforts of others."*
>
> —*Osler*

*See "Facsimile of Osler's first published article" on page 415 of this volume.

†The Osler Memorial Committee of the Hamilton Medical Society, which is the Wentworth County Branch of the Ontario Medical Association. The town of Dundas is in the County of Wentworth.

THE HOUSING OF THE OSLER COLLECTION IN THE MEDICAL BUILDING, McGILL UNIVERSITY

C. F. Wylde, M.D.

Montreal

THE Osler Collection of medical incunabula and other works of historical and bibliographical interest which was bequeathed to the Medical Faculty of McGill University by the late Sir William Osler will be housed in the Medical Building. By way of a memorial a room 30 x 40 feet, partly top lit, has been remodelled by Mr. P. E. Nobbs for the reception of these volumes. The walls have been lined with book cases and panelling in oak, and the room has been arranged with alcoves for the convenience of individual research workers. The decorations embody the arms of the late Sir William Osler and those of the various academic institutions with which he had been connected. Accommodation is provided for the seven thousand odd volumes and an allowance made for a twenty-five per cent increase.

The accompanying photographs show the doorway and the interior. Over the entrance, which is a marble vestibule, are the words in bronze: BIBLIOTHECA OSLERIANA, while inside, above the oak door, is a carved oak plaque bearing the inscription:

SIR WILLIAM OSLER, BART.
Born Bondhead, Ont. 1849.
Died Oxford, England, 1919.

Doorway of Osler Library Room, Medical Building,
McGill University.

Interior of Osler Library Room, Medical Building, McGill University.

BIBLIOGRAPHICAL

University of Toronto
(1867-69)

McGill University
(1870-1884)

Oxford University
(1905-1919)

University of Pennsylvania
(1885-1889)

Johns Hopkins University
(1890-1904)

Coats of Arms, or Seals, of the five Universities which were the scene of Osler's academic activities.

THE ACADEMY OF MEDICINE
TORONTO

THE JOHNSON CABINETS IN THE OSLER COLLECTION AT THE ACADEMY OF MEDICINE, TORONTO

JABEZ H. ELLIOTT, M.B.

Toronto

IN Osler's writings, and in his intimate conversations and addresses, repeated reference is made to the influence on his career of his three great teachers, to whom he dedicated his "Practice." From the Rev. W. A. Johnson, (1816–1880), Warden of Trinity College School he received his early training in natural history and microscopy, and at this school, through his eagerness and enthusiasm over these subjects, he first met James Bovell, (1817–1880), who became his preceptor in medicine. The story of the influence of these teachers on the young Osler has been well told by Cushing in his "Life," and by Gwyn in his article in this memorial volume.

There are sixty pages of Cushing in which there are numerous references to Johnson as an artist who sketched well, as a wood carver, a scientist, a nature lover who delighted in the woods in springtime, an omnivorous naturalist interested in everything. He had, further, that real gift of imparting his knowledge and his enthusiasm to others, a trait which became well developed in his student. "His field notebook with the tabulation of his microscopic slides all carefully enumerated and indexed, tells the story better than words, and it is a pity that it cannot be quoted in full, particularly during the year when the young Osler begins to appear on its pages."*

The microscope case, "with its many tempting little drawers,"

*Cushing's "Life of Osler" vol. i, p. 37.

and the collection of slides, over which the young Osler worked with Johnson and Bovell, and to which he contributed both as a student at Trinity College School and later, has been preserved. It seems fitting that this wonderful cabinet, the work of W. A. Johnson's own hands, should have a place of honour in close relation to the bibliography of Osler's writings on biological subjects. The photograph shows it as it now stands in the Osler Collection in the Academy of Medicine, Toronto.

To what extent Osler was responsible for the amalgamation of the Toronto Clinical Society, the Toronto Medical Society, and the Toronto Pathological Society with the Ontario Medical Library Association to form the Academy of Medicine, Toronto, we can not say positively. He may have made the suggestion. We do know that after he met representative members of those Medical Societies at the residence of his friend Dr. J. E. Graham, and spoke on the desirability of union, such a union was soon consummated. The Academy building stands at the corner of Grosvenor Street and Queen's Park. One afternoon, not long before his fatal illness, Dr. Arthur Jukes Johnston, in conversation with a small group of us within the Academy, related that it was on that corner talking to him that Osler made his decision to give up his course in arts, which had been preparation for the Church, and begin the study of medicine. And now within the Academy, beside the spot where Osler made the decision fraught with unforeseen results in the development of clinical medicine in America and England, repose the microscope, the slides with their catalogue, the working tools, the field notes, the journals, the drawings, and many of the reference text books of W. A. Johnson which tell the story of Osler's introduction to biology. In this collection we have most of the story of the influences, outside Bovell, which turned Osler to the study of medicine. The student of Osler's life must see this remarkable collection if he wishes to know at first hand of the work of Johnson and the early days of Osler's studies in science. The journals, with Johnson's extensive notes of observations in the fields, the swamps, the marshes and rivulets, in botany, entomology, parasitology, ornithology, geology, osteology, comparative anatomy and related and unrelated branches of science are a mine of information regarding the time spent by these tireless students of nature in fields outside the regular college work. There are beautiful

sketches in pencil and in water colour of microscopic specimens and of plant life which well illustrate the artist gift of this great teacher. The microtome, reagent bottles, staining dishes, dissecting tools, the stores of slides, cover glasses and mounting materials tell the story of long hours spent on the cabinet and its perfect specimens.

Here may be seen all the slides mentioned by Cushing in his "Life" not even excepting the preparations of "Nebuchadnezzar's cat."

The main headings in the classified index of the catalogue of slides in the larger cabinet are as follows, (the dates are 1858 to 1873):

(1) Entozoa, Acari, Parasites, etc.
(2) Skin, Bone, Hoof, Claws, Teeth, Papillæ.
(3) Feathers, Scales.
(4) Hair, Spines.
(5) Insects, (Whole).
(6) Eggs.
(7) Head and parts.
(8) Body, etc., of Insects.
(9) Feet, Legs, etc., Spiracles, Stings, Wings, Tracheæ.
(10) Stomata, etc.
(11) Internal Structures, Stomachs, Intestines, Introt. Organs, etc., Muscle.
(12) Cartilage, Nerve, Muscle, Internal Structures, Human, Animal, etc.
(13) Shell structures.
(14) Algæ.
(15) Diatomaceæ.
(16) Desmids.
(17) Ferns, Equisetaceæ.
(18) Leaves, Flowers, Seeds.
(19) Mosses, Lichens, Fungi.
(20) Rust, Mould, etc., etc.
(21) Wood, Roots.
(22) Crystals.
(23) Fossils and Stones, Metals, Earths, Wood.
(24) Photographs and Miscellaneous.

. . . . .

The cabinets illustrated with this article were the gift to the Academy of Dr. Arthur Jukes Johnson, and now (August, 1925), the Academy has received from Dr. James Bovell Johnson, the "Jimmy" of the catalogues, a third cabinet with its hundreds of slides similarly catalogued with explanatory notes. With this are two unbound volumes of water colours of birds, beasts and reptiles of India with explanatory text. These are dated about 1801 and 1802, and appear to be the work of W. A. Johnson's

father, Col. John Johnson, C.B., who was quartermaster-general to the Bombay forces, was formerly aide-de-camp to Wellesley, and rising to the rank of full colonel had a distinguished military career in India. These beautiful drawings indicate that W. A. Johnson's love of natural history and his abilities as an artist were doubtless inherited from, and fostered by his father.

The journals form a most interesting record of the finding of plants which have quite disappeared from the immediate neighbourhood of Toronto. Year after year we have the dates of flowering of the cypripediums, the showy orchis, the calopogon, pogonia, arethusa, calypso and a hundred other plants, many of which have been sketched in water colour, the coming and going of the song birds, the flight of the wild pigeon, of the woodcock, the partridge and the wild goose. He is another White of Selborne. "The sun at 5.30 a.m. exhibited three distinct parhelia so bright as to be readily mistaken, from a window, for the sun itself," and a sketch appears on the margin. August 2nd, 1864 has over a page describing the army worm and how one Sunday afternoon it laid waste twenty-five acres of a neighbouring farm "March 22nd, 1865, Chara vulg. This plant in great quantities was washed down the river in the late flood. Put a terminal portion under the microscope and saw the circulation very distinctly....." This is followed by a wonderful word picture of the Humber river in flood, of which we can only quote the opening sentence. "The Humber, which in summer is a gentle meandering stream, finding its way to the lake by a thousand tortuous turns and bends from side to side of its banks, wending its weary way round the corners of numberless pieces of lime stone, some large, but for the most part broken flat bits, its waters scarcely sufficient to remove the slimy coat of algæ from the lovely specimens of orthoceratites and leptina and only now and then washing bright as with varnish the surface of a beautiful specimen of graphtolite or some other of the almost microscopic encrinites with now and then a little shallow pool to protect for a moment or two the frightened minnows from the clutches of the active school children who delight to paddle among its cool and temptingly smooth stones, is now swollen to a mighty river."

"August 7th, 1867. Telegraphed to W. Osler at Dundas to meet me at boat at Hamilton. He was there and drove me to

Dundas..... Went with Willy Osler to the Canal where he showed me beautiful specimens of a polyp attached to the timber of the wharf. Its ova are those of cristatella mucedo; but I was unable to examine the beautiful cilia. I brought home, also, a large variety of Chara which grows in eight or ten feet of water."

There are other references to expeditions with Osler with notes of their observations and finds.

Johnson sought aid in identification of his specimens whenever he could. The entry under February 9th, 1869, reads: "Wrote Dr. Packard to-day about insects and sent him sketch of the Lepiomede with a kind of pulex, asking him about it. I find the larvæ which I take to be those of Simulium molestum live on Diatoms. The stomachs are full of Meridion and Bacillaria. What have the tentacles to do in capturing this kind of food? Sometimes they are full of Diatoms or four or five Diatoms caught as it were in them."

These few extracts from Johnson's journals will indicate the nature of some of his natural history observations. Many pages tell of his Church troubles, while here and there is much sound philosophy.

These cabinets with their contents form a permanent memorial of the indefatigable industry and ability of Osler's first great teacher William Arthur Johnson, Priest of the Parish of Weston, Ontario.

DESCRIPTION OF THE W. A. JOHNSON CABINETS NO. 1 AND NO. 2

CABINET NO. 1

(See lower cabinet in Fig. I for interior, also Fig. II for exterior)

On a table 22 by 39 inches, surface 28½ inches from the floor, stands a walnut cabinet—outside end measurement 10 inches by 24½ inches high, the front of which is a door 23½ by 36½ inches, which is hinged below and falls on the projecting part of table before the cabinet as the front of a desk. This front is in three panels, each panel outlined with beaded moulding. At either end of the table is a drawer.

The cabinet is divided into four sections by three upright partitions, one on the left of five inches clear, the next of eight inches, and the two on the right ten inches each.

The upright compartment to the left has a drawer below, in which are small crucibles, section lifters, lead block and other accessories; above this is a shelf containing a pad of drawing paper. Above this another compartment with three trays, each of which holds five glass salt-cellars. Here, too, is a condenser (Bull's eye) and other accessories for the microscope. The upper tray contains mounting materials, and cover glass pressure clamps. An early type of microtome fits into guides below.

In the next upright compartment stands the microscope; sliding shelves about the long tubes are perforated to hold numerous eye-pieces and object-glasses of various sizes, while a tray above holds many other accessories for the microscope including a camera lucida, polarizing and reflecting prisms, and a metal reflector for opaque objects.

The two right hand compartments are almost symmetrical, each having a three inch drawer below, above this a 1¼ inch tray, then a row of four specimen boxes standing 2½ inches high and each exhibiting, when the sliding sides are removed, four sections for slides each holding eight slides. Each box has four depressions for labels to indicate the catalogue number of the slides within. Above these are eight slide trays, each slotted to hold three rows of twenty-five slides which stand at an angle of sixty degrees that they may be more readily seen. Above these is another row of four closed specimen boxes similar to those below. The lower trays are fitted with smaller trays and compartments, in which are fine scissors, scalpels, dissecting needles, brushes, cover slips, mounting block, hollow cells, watch glasses, injection syringes, strop, etc. One of the drawers at the base is fitted to hold a stock of slide covers, working equipment, unmounted specimens, etc., the other has glass stoppered vials for stains and mounting solutions.

The cabinet is fitted for 1,125 slides in the open trays, and for 512 slides in the closed specimen boxes. As received by the Academy from the Estate of the late A. J. Johnston, the cabinet contained 1,131 slides. There is a complete catalogue with many descriptive and source notes.

CABINET NO. 2

(See upper cabinet in Fig. I)

On the top of the desk cabinet is a slide cabinet of cherry, the inside measurement of which is sixteen inches high, twenty-four inches wide, and nine inches deep. It is divided into three upright compartments, each holding twelve sliding trays. These trays hold two rows of twenty-six slides each, again on an angle of sixty degrees. The cabinet is thus made for 1,872 slides, but contains approximately only 455 slides.

FIG. I.—The interior of the Johnson Cabinets No. 1 and No. 2, showing fittings and contents. (No. 2 is placed above No. 1).

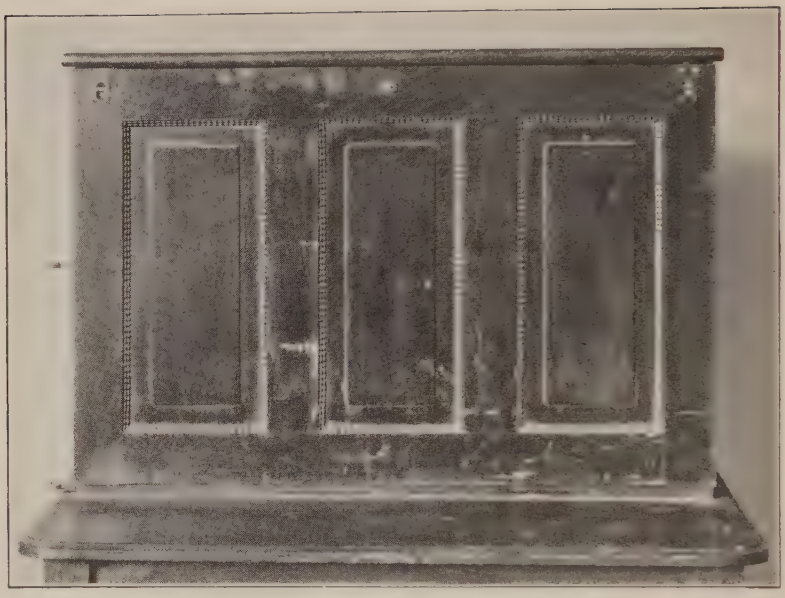


FIG. II.—Cabinet No. 1, closed, showing exterior. Note the hand-made panelling of the doors, Johnson's own work throughout.

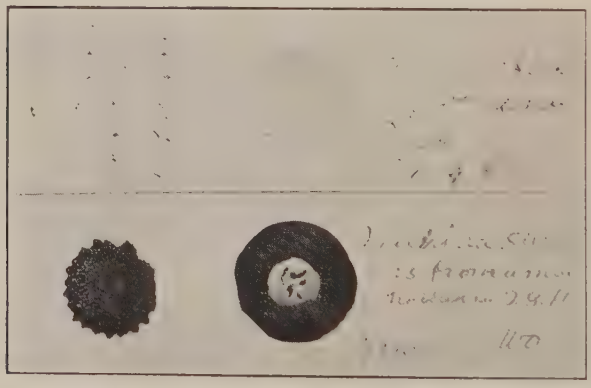


FIG. III.—Early slides prepared by Osler and presented to Johnson. The upper is labelled "Pleurosigma attenuatum, etc., etc., etc., from outlet of Grenadier Pond, 26/9/69. W. O." The lower "Trichina Spiralis from a man who died in T. G. H. (Toronto General Hospital), 3/3/70. W. O." Early examples of the well-known signature W. O. These are cut in the slide with a diamond.

CLASSIFIED AND ANNOTATED BIBLIOGRAPHY

OF THE PUBLICATIONS OF

SIR WILLIAM OSLER, Bart., F.R.S., etc.

(Based on the Chronological Bibliography by Minnie Wright Blogg)

Compiled, augmented and annotated by Maude E. Abbott, Montreal; E. B. Krumbhaar, Philadelphia; Minnie Wright Blogg, Baltimore; and Archibald Malloch, Montreal. Edited by Fielding H. Garrison and Henry W. Cattell, Washington.

". . . To be of value to the full-fed student of to-day, a bibliography should be a Catalogue raisonné, with judicious remarks and explanations."

—WILLIAM OSLER

". . . What then do these men not owe to him who gathers up their works, and in so doing recalls their achievements, and thus labours to lift that icy pall of oblivion which descends upon everything human. . . ."

—JOHN FERGUSON, *Bibliotheca Chemica.* (Quoted by OSLER, *Tr. Bibl. Soc.*, 1916, xiv, 134).

NOTE

THE classified bibliography of Osler's writings which follows is based on Miss Minnie Wright Blogg's "Bibliography of the Writings of Sir William Osler" (revised and enlarged edition, 1921, from the original publication in 1919) and Dr. Maude E. Abbott's "Classified Bibliography of Sir William Osler's Canadian Period (1920)". These references heretofore published have been augmented, verified and annotated by the various collaborators named on the title-page, and are grouped, under the four periods of Sir William Osler's academic activities, as follows:

Canadian (Toronto and Montreal, 1869-1884).
American, I (Philadelphia, 1885-1889).
American, II (Baltimore, 1890-1904).
English (Oxford, 1905-1919).

The material of these four periods has been further divided, split by years, into seven rubrics, namely:

I. Natural Science (including Original Research). (See also III. Clinical medicine). (pp. 473-478.)

II. Pathology: 1. Comparative. (pp. 479-482.)
2. Human. (pp. 483-512.)

III. Clinical medicine (including original descriptions of diseases and symptoms). (pp. 513-539.)

IV. Literary Papers, History, Biography, Bibliography. (pp. 560-575.)

V. Medical Education, Medical Societies, and Medical Profession. (pp. 576-592.)

VI. Public Welfare Activities (including European War.) (pp. 593-601.)

VII. Volumes Edited. (pp. 602-606.)

The annotations have been made in accordance with Osler's expressed preference for bio-bibliographical presentation rather than dry lists of titles. The illustrations are drawn chiefly from the articles or monographs which represent his actual original contributions in the field of clinical medicine.

CLASSIFIED BIBLIOGRAPHY OF SIR WILLIAM OSLER'S PUBLICATIONS WITH ANNOTATIONS

(1869-1919)

Original articles in heavy type.

Abbreviations: { *C.r.: Collected reprints.* / *Rept.: Reported in.*

I. NATURAL SCIENCE, INCLUDING ORIGINAL RESEARCH

(See also III. Clinical Medicine)

CANADIAN PERIOD

(1869-1884)

1869

Christmas and the microscope. *Hardwicke's Science-Gossip: an Illustrated Medium of Interchange and Gossip for Students and Lovers of Nature,* Lond., 1869, v, 44.

The earliest of Osler's signed publications, as evidenced by the following statement in his own handwriting, found by his literary executors among his private papers: "I was always fond of beginning with a quotation, ... and it is amusing to note, even at the very start of my ink-pot career, a fondness for tags of quotation, this one from Horace, in those days a familiar friend (*Science Gossip*)," (Fig. 1.)

1870

Canadian diatomaceæ. *Canad. Naturalist & Quart. J. S.,* Montreal, 1870-71, n. s., v, 142-151. [*In his:* C. r., 1870-82, i, No. 1.]

Osler's first scientific article, published while still an undergraduate in the Toronto School of Medicine. Gives a minute and scientific description of their "life-history and structure," with a list of 109 species, grouped under 29 genera, found by him near Dundas, his boyhood home. Acknowledges the aid of Rev. W. A. Johnson of Weston, and Prof. James Bovell of Trinity College, Toronto.

1873

Ueber einige im Blute vorhandene bakterien-bildende Massen. (With E. A. Schäfer). *Centralbl. f. d. med. Wissensch.,* Berl., 1873, xi, 577-578. *Abstr., J. Anat. & Physiol.,* Lond., 1873-74, viii, 198.

A preliminary communication.

On the action of certain reagents, atropia, physostigma and curare on the colourless blood-corpuscles. (Presented London Medical Microscopical Society, May 16, 1873.) *Proc. Royal Soc.*, Lond., 1873-74, xxii, 391-398. *Also, Quart. J. Micr. Soc.*, Lond., 1873, n. s., xiii, 307-309. *Also, Month. Micr. J.*, Lond., 1873, x, 102-103. *Abstr.: J. Anat. & Physiol.*, 1873-74, viii, 232. *Also, Brit. M. J.*, Lond., 1873, ii, 636. [*In his:* C. r., 1870-82, i, No. 2.]

1874

An account of certain organisms occurring in the liquor sanguinis. (Communicated by Prof. J. Burdon Sanderson, received May 6, 1874.) *Proc. Roy Soc.*, Lond., 1873-74, xxii, 391-398. *Also, Month. Micr. J.*, 1874, xii, 141-148 (one plate of 9 fig.). *Also, Collected Papers*, Physiol. Lab., Univ. Coll., Lond., 1874-75. [*In his:* C. r., 1870-82, i, No. 3.]

An account of work done with Mr. Edward Schäfer, in the Physiological Laboratory, University College, London, under Professor J. Burdon Sanderson, on the form and movement of the blood platelets.

1876

Trichina spiralis. (Extract from a lecture on animal parasites and their relation to public health, being one of the Somerville Lectures of the Natural History Society of Montreal.) *Canad. J. M. Sc.*, Toronto, 1876, i, 134-135; 175-176. [*In his:* C. r., 1870-82, i, No. 11.]

Relates personal observation of two cases in 1870 in the dissecting-room and five experiments done by himself on two rabbits, a cat and two dogs, the last one on a rabbit being successful. Also describes a case of trichiniasis seen in Traube's Clinic at Berlin during November, 1873.

1877

***Verminous bronchitis in dogs.** (Read before the Montreal Veterinary Medical Association, Mar. 29, 1877. Rept. Veterinarian, 1877, l, 158.) *Veterinarian*, Lond., 1877, l, 387-397. *Abstr.: Centralbl. f. d. med. Wissensch.*, Berl., 1878, xvi, 58. [*In his:* C. r., 1870-82, i, No. 12.]

Gives an account of an epidemic at the Montreal Hunt Club based on fifteen cases with eight autopsies, description and figuration of parasite, which he here discovered, and which has since borne his name (*filaria Osleri.*)

1878

Demonstration of microscopic illustrations with various forms of illuminations under high and low powers. (Presented, Natural History Society, Montreal, Feb. 25, 1878.) *Canad. Naturalist*, Montreal, 1878, n. s., viii, 444.

Dr. Osler was on the committee of arrangements, and over thirty instruments were exhibited.

Ueber die Entwickelung von Blutkörperchen im Knochenmark bei perniciöser Anämie. *Centralbl. f. d. med. Wissensch.*, Berl., 1878, xvi, 465-467. [*In his:* C. r., 1870-82, i, No. 21.]

1881

Supplementary note on Canadian fresh-water Polyzoa. (Presented, Natural History Society, Montreal, Jan. 21, 1881.) *Canad. Naturalist*, Montreal, 1881, n. s., ix, 473.

Supplements his paper on the Canadian Freshwater Polyzoa read before the Society in January, 1877 (listed below under date of publication).

*Specimen in the Medical Museum of McGill University.

MICROSCOPY.

Christmas and the Microscope.—

Nec jam sustineant onus,
Sylvæ laborantes, geluque
Flumina constiterint acuto,

might well be said of Canadian woods and streams at this season of the year. The earth has put on her winter robes, and under them she hides most of those objects which in summer please and delight us so much. A cheerless prospect for microscopists, one would think. So I thought, as on Christmas afternoon I sallied out with bottles and stick in search of diatoms, infusoria, snow-peas, &c., though I did not expect to be very successful. After wandering about for some time, searching vainly for an unfrozen stream, I was about to return home with empty bottles, when I suddenly bethought myself of an old spring which supplied several families with water, and which I knew therefore would be unfrozen. In this country, wherever there is a good spring some kind individual sinks a barrel for the benefit of the community at large, and thereby benefits microscopists in no small degree, for in these you are generally sure to find a good supply of microscopic objects. When I got to the spring the first thing that greeted my sight was a piece of algæ floating on the top of the water, and on a closer examination of the barrel I saw that the sides had a dark-brown coating, in which I knew diatoms and infusoria would be found. Scraping some of this off, I placed it in a bottle and retraced my steps homeward, well satisfied with my afternoon's walk. Getting home at that unfavourable time for working, just as the light is beginning to fail, I had to exercise my patience and wait till evening to see what my bottle contained. I had not long to wait, as darkness soon succeeds the light here: so when I had got a lamp lighted, I proceeded to examine my spoils. A short account of the things I found may not be uninteresting to English readers of the Science-Gossip, as it will give them some idea of what lovers of science meet with in this country. Upon putting a slide under the microscope before I had it properly focussed, I saw the dim outline of some little creature kicking and struggling as though it were caught in a net. It turned out to be one of the Tardigrada, or little water-bears, that had got its feet entangled in the gelatinous tube of the *Encyonema prostratum*. It was with great difficulty that it freed itself from the jelly, and then it began its slow and stately walk, which formed such a contrast with the quick, lively movements of the animalcules with which it was surrounded. The little water-bears are by no means common objects with us, but it only makes them the more acceptable when we chance to get them. The *Encyonema prostratum* seems to delight in these quiet water-barrels, though it is occasionally found on the wave-washed Cladophora of our lakes. They always remind me of the manner in which peccaries sleep, packed closely together in hollow logs. I have seen the *Encyonema* shoot out of its tube, but whether it can find its way back again or not I do not know. Two species of *Euglenæ* were very plentiful, viz., the *E. viridis* and *E. acus*. They are found here in the spring in such numbers as to give to the water they are in a dark green colour. The *Paramecium aurelia* and *Kolpoda cucullus* were in great abundance. Among other Infusoria were the *Amphileptus anser*, two species of *Vorticellinæ* and the *Leucophrys patula*. Of Desmids there were three species: *Closterium acerosum*, *Cosmarium undulatum*, and *Scenedesmus quadricauda*. Of Diatoms, besides the *Encyonema*, the following species were present: *Gomphonema coronatum*, *G. minutissimum*, *Melosira varians* (Thwaites), *Fragillaria rhabdosoma*, *Meridon vernale*, *Navicula amphirhynchus*, *N. librile*, *Hyalosira rectangula*, *Synedra splendens*, *Cymbella gastroides*, and some others.—*W. Osler, Dundas, Ontario.*

Fig 1.—Facsimile of Osler's first published article.

1882

Bizzozero's new blood element and its relation to thrombus formation. (Presented, Medico-Chirurgical Society of Montreal, Feb. 17, 1882, 498-499.) Rept. *Canada M. & S. J.*, Montreal, 1881-82, x, 499-500. *Also, Med. News,* Phila., 1882, xl, 250.

This preparation was made from a specimen of atheroma of the aorta which was also shown at this meeting (listed below under Rubric II. 2), and which is figured among the illustrations of his Cartwright Lectures "On certain problems in the physiology of the blood corpuscles." *q. v. infra.*

The third corpuscle of the blood. (Presented, Am. Ass. Adv. Sci., Montreal, Aug. 28, 1882.) *Med. News,* Phila., 1883, xliii, 701-702. [*In his: C. r.*, 1882-92, ii, No. 57.] *Also,* translation under title, **Ueber den dritten Formabestandteil des Blutes.** *Centralbl. f. d. med. Wissensch.*, Berl., 1882, xx, 529-531. [*Abstr., Tr. Am. Ass. Adv. Sci.,* Salem, Mass., 1883, xxxi, 511.] [*In his:* C. r., 1882-92, ii, No. 47.]

Note on cells containing red blood corpuscles. (Presented, Am. Ass. Adv. Sc., Montreal, Aug. 23, 1882.) *Tr. Am. Ass. Adv. Sc.,* Salem, Mass., 1883, xxxi, 511. *Also, Lancet,* Lond., 1882, i, 181.

1883

On the brain as a thinking organ. (Somerville Lecture, Montreal, March 3, 1881.) *Canad. Naturalist,* Montreal, 1883, x, 109.

Biology notes. I. On a remarkable vital phenomenon observed at Lake Memphremagog; II. On the occurrence of Ophirydium versatile; III. On the distribution of Pectinatella magnifica in Canada. *Canad. Naturalist,* Montreal, 1883, n. s., x, 251-252.

The development of blood-corpuscles in the bone-marrow. (Presented, American Association for Advancement Science, Montreal, Aug. 28, 1882.) Rept. *Tr. Ass. Adv. Sc.,* Salem, Mass., 1883, xxxi, 512. *Also,* (by title) *Canad. Naturalist,* Montreal, 1883, n. s., x, 383.

On Canadian fresh-water polyzoa. (Presented, Natural History Society, Montreal, Jan. 29, 1877.) *Canad. Naturalist,* Montreal, 1883, n. s., x, 399-406. [*In his:* C. r., 1882-92, ii, No. 53.]

Researches made in the summer of 1867 with Rev. W. A. Johnson and in 1868 under Prof. Hincks of Toronto University.

On certain parasites in the blood of the frog. (Presented before the Microscopical Society of Montreal, Nov., 1882. Rept. *L'Union méd. du Canada,* Montreal, 1882, xi, 606.) *Canad. Naturalist,* Montreal, 1883, n. s., x, 406-410 (5 fig.) Referred to under title "Blood Parasites of Frogs," *N. Y. M. J.*, 1899, lxix, 63-64. [*In his:* C. r., 1882-92, No. 52.]

Demonstrates and classifies in the frog (*Rana mugiens*) the *Trypanosoma Sanguinis* (Grubby) and the *Drepanidium ranarum* (Lankester).

Note on the microcytes in the blood and their probable origin. *Tr. Am. Ass. Adv. Sc.,* Salem, Mass., 1883, xxxi, 512-513.

1884

The brain of the seal. (Presented, Natural History Society, Montreal, Nov. 26, 1883.) *Canad. Rec. Nat. Sc.,* Montreal, 1884, i, 64.

"Illustrated by many prepared specimens."

PHILADELPHIA PERIOD

(1885-1889)

1886

On certain problems in the physiology of the blood-corpuscles. I. The blood-plaque or third corpuscle; II. Degeneration and regeneration of the corpuscles; III. *The relation of the corpuscles to coagulation and thrombosis. (The Cartwright Lectures, delivered before the Association of Physicians and Surgeons, New York, March 23, 27 and 30, 1886.) *Med. News*, Phila., 1886, xlviii, 365-370 (6 illus.); 393-399 (11 illus.); 421-424 (7 illus.). *Also, Med. Rec.*, N. Y., 1886, xxix, 377-381 (6 illus.); 405-410 (11 illus.); 433-436 (7 illus.). *Abstr., Brit. M. J.*, Lond., 1886, i, 807-877 (4 fig.); 861-863 (11 fig.): *Canada M. & S. J.*, Montreal, 1885-86, xiv, 605-611: *The Epitome*, 1886-87, vii, 209. [*In his:* C. r., 1882-92, ii, No. 71.] (Fig. 2.)

These important lectures, based on original research, begun in 1882 on the blood-plates of Bizzozero (hæmatoblasts of Hayem), established Osler's reputation as an original investigator. The aggregation of blood platelets which takes place as soon as the blood is withdrawn from the body is known as Osler's phenomenon. In his own words here published: "I was the first to observe, in 1881, that in the most superficial part of the white thrombi, the blood-plaques were present."

Experimental transfusion. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 382.

Reviews work of Bizzozero on dogs showing that transfusion of the defibrinated blood of animals of same species is not injurious.

The blood plaque. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 437-438.

On his own Cartwright Lectures, the last of which appears in this issue.

The relation of the corpuscles to coagulation and thrombosis. *Brit. M. J.*, Lond., 1886, i, 917-919.

1889

On phagocytes. (Address, Alumni Association of Bellevue Hospital, New York, April 3, 1889.) *Med. News*, Phila., 1889, liv, 393-396; 421-425. *Also, Med. Rec.*, N. Y., 1889, xxxv, 393-399: *New York M. J.*, 1889, xlix, 393-400. *Abstr.:* [by Kral.] *Centralbl. f. Bakt. u. Parasitenk.*, Jena., 1890, vii, 103-104. [*In his:* C. r., 1882-92, ii, No. 94.]

BALTIMORE PERIOD

(1890-1905)

1899

Blood parasites of frogs. (Letter from Baltimore dated Jan. 9, 1899.) *N. York M. J.*, 1899, lxix, 63-64.

Refers to the article in the *Canadian Naturalist*, 1883, x, 406-410, in which Osler described and figured the Trypanosoma and Trepanidium.

1905

Resumé of history of blood platelets. (Delivered Johns Hopkins Hospital Medical Society, Mar. 6, 1905.) Rept. *Johns Hopkins Hosp. Bull.*, Balt., 1905, xvi, 200.

*Two of the illustrations figured here are from specimens of aneurism now in the Pathological Museum of McGill University, (Museum Nos. 15.75[12] and 151.67[85]. This is stated below the cuts in the article. *M. E. A.*

CARTWRIGHT LECTURES.

ON CERTAIN PROBLEMS IN THE PHYSIOLOGY OF THE BLOOD CORPUSCLES.

Delivered before the
Association of the Alumni of the College of Physicians and Surgeons, New York, March 23d, 27th, and 30th, 1886.

I. The Blood Plaque or Third Corpuscle.
II Degeneration and Regeneration of the Corpuscles
III. The Relation of the Corpuscles to Coagulation.

BY

WILLIAM OSLER, M.D.,

FELLOW OF THE ROYAL COLLEGE OF PHYSICIANS, LONDON; PROFESSOR OF CLINICAL MEDICINE IN THE UNIVERSITY OF PENNSYLVANIA, PHILADELPHIA.

REPRINTED FROM

THE MEDICAL NEWS,

April 3, 10, 17, 1886.

FIG. 2.—Title-page of "The Cartwright Lectures," which presented an extensive research into the physiology of the blood cells and the phenomena of coagulation. (Illustrating Rubric I).

II. PATHOLOGY—1. COMPARATIVE

(Veterinary Medicine)

(See also I. Original Research.)

CANADIAN PERIOD

(1876-1884)

1876

The relation of animals to man. (Inaugural Address delivered at Montreal Veterinary College, Oct. 4, 1876.) *Vet. J. & Ann. Comp. Path.*, 1876, iii, 465-466.

1877

Diptheria in the calf. (**Retrospect.**) *Am. Vet. Rev.*, N. Y., 1877-78, i, 101-103.

Hæmoglobinuria in horses. (**Retrospect** of an article by Bollinger.) *Am. Vet. Rev.*, N. Y., 1877-78, i, 135-138; 169-171.

On changes in the brain in hydrophobia (**Retrospect**, initialled, of an article by Benedict. *Virch. Arch.*, Berl., 1875, 557.) *Am. Vet. Rev.*, N. Y., 1877, i, 297-298. *Also, Veterinarian*, Lond., 1878, li, 297-298.

1878

On the pathology of the so-called pig typhoid. (Presented at the Pathological Society of New York, Jan. 23, 1878.) *Vet. J. & Ann. Comp. Path.*, Lond., 1878, vi, 385-402. *Also, Veterinarian*, Lond., 1878, li. *Also*, Lond., Baillière, Tindall & Cox, 20 p. 8°. [*In his:* C. r., 1870-82, i, No. 20.]

Comparative pathology. (**Opening lecture** at Montreal Veterinary College, Oct. 1, 1878.) Rept. *Vet. J. & Ann. Comp. Path.*, Lond., 1878, vii, 405.

Report of British National Veterinary Congress of 1881. (Presented at Montreal Veterinary Medical Association, Oct. 25, 1881.) Rept. *Vet. J. & Ann. Comp. Path.*, Lond., 1881, xiii, 433.

[Description of a method for placing medium sized animals on the table.] (Presented Montreal Veterinary Medical Association, Nov. 7, 1878. Rept. *Vet. J. & Ann. Comp. Path.*, Lond., 1878, vii, 408.
The method was one in use at the Brown Institute in London.

1879

Heart and bony sclerotic of a sword-fish. (**Specimen presented**, Medico-Chirurgical Society of Montreal, Aug. 22, 1879.) Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 336.

1882

I. Bronchitis in a calf—purulent bronchiectasy; II. Glanders [in head of horse]; III. Verminous aneurism [in horse.] (**Specimens presented**, Medico-Chirurgical Society of Montreal, Feb. 17, 1882.) Rept. *Med. News*, Phila., 1882, xl, 250-251. II. and III. Rept. *Canada M. & S. J.*,

Montreal, 1881-82, x, 500-501. III. Presented again at Medico-Chirurgical Society of Montreal, Nov. 17, 1882. Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 356.

[Amphistoma conicum in paunch of cow.] (**Specimen presented**, Medico-Chirurgical Society of Montreal, Oct. 20, 1882.) Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 298. *Also, Med. News*, Phila., 1882, xli, 580.

1883

Cestode tuberculosis. A successful experiment in producing it in the calf. (With A. W. Clement, veterinary student. Presented, Montreal Veterinary Association, Jan. 19, 1881.) Rept. *Am. Vet. Rev.*, N. Y., 1882, vi, 6-12. *Also, Veterinarian*, Lond., 1882, xiv, 288. [*In his:* C. r., 1882-92, ii, No. 49.]

Lungs of a horse which had died of pneumonia following epidemic influenza. (**Specimen presented**, Medico-Chirurgical Society of Montreal, Feb. 2, 1883.) *Canada M. & S. J.*, Montreal, 1882-83, xi, 498.

An investigation into the parasites in the pork supply of Montreal. (With A. W. Clement, Student. Presented, Medico-Chirurgical Society of Montreal, and the Montreal Board of Health, Jan. 12, 1883. *Canada M. & S. J.*, Montreal, 1882-83, xi, 325-336. [*In his:* C. r., 1882-92, ii, No. 54.]

(La trichine et la trichinose, by Joannes Chatin.) Paris: J.-B. Baillière et fils, 1883, 8°. (Initialled **book review.**) *Am. J. M. Sc.*, Phila., 1883, n. s., lxxxvi, 227-229.

1884

Pneumo-enteritis of the hog. (**Specimen presented**, Medico-Chirurgical Society of Montreal, Jan. 11, 1884.) Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 429.

Portion of muscle, intestine, and kidney from horse dying of toxic hæmoglobinuria or azoturia. (**Specimens presented**, Medico-Chirurgical Society of Montreal, Feb. 15, 1884.) Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 545. *Also, Canada M. Rec.*, Montreal, 1883-84, xii, 155.

*Actinomykosis [in jaw of cow.] (**Specimen presented**, Medico-Chirurgical of Montreal, Feb. 29, 1884.) Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 599. *Also, Med. News*, Phila., 1882, xl, 250: *Canada M. Rec.*, Montreal, 1883-84, xii, 196.

PHILADELPHIA PERIOD

(1885-1889)

1885

I. Tænia echinococcus; II. Cysticercus cellulosæ of brain, heart, and voluntary muscles; III. Liver with dilatation and calcification of the bile-ducts, the effects of flukes. (**Specimens from the lower animals presented** at Pathological Society of Philadelphia, Sept. 24, 1885.) Rept. *Tr. Path. Soc.*, Phila., 1885-87, xiii, 222-224. *Also, Med. News*, Phila., 1885, xlvii, 439: *Med. Times*, Phila., 1885, xvi, 109: *Boston M. & S. J.*, 1885, cxiii, 398.

Specimen I. was obtained experimentally by feeding a dog with hydatids from the liver of a pig and killing the animal seven weeks later.

*Specimen in the Medical Museum of McGill University.

ESSAI DE BIBLIOGRAPHIE HIPPIQUE.

Donnant la description détaillée des ouvrages publiés ou traduits en Latin et en Francais sur le Cheval et la Cavalerie, avec de nombreuses biographies d'auteurs hippiques, par le Général Mennessier de la Lance, ancien Commandant de la 3e division de cavalerie. Tome Premier A à K, Paris, 1915; Tome Second L à Z et supplément, Paris, 1917, Lucien Dorbon.

NOT naturally dry, bibliography is too often made so by faulty treatment. What more arid than long lists of titles, as dreary as the genealogies of the Old Testament, or as the catalogue of the ships in Homer! What more fascinating, on the other hand, than the story of the book as part of the life of the man who wrote it—the bio-bibliography! Such, for example, is the recent bibliography of Samuel Johnson, issued by the Oxford Press, from the pen of that master of the subject, the late William Prideaux Courtnay, which shows us, even better than does Boswell, the working ways of the great lexicographer. To be of value to the full-fed student of to-day a bibliography should be a *Catalogue raisonné*, with judicious remarks and explanations. In our great libraries this is impossible from lack of space, but the plan is followed with great advantage in the special bibliographies, of which the work before us is a model of its kind. Volume II., which has just appeared, completes this important contribution to the literature of the horse—for works in Latin and in French. We may congratulate the veteran general on finishing a task that has occupied his leisure for fifteen years. As it is a bio-bibliography, we turned at once to the author's name, opposite which is only one small report on a Cavalry Conference in 1892, to find that he was born in 1835, made Sub-Lieutenant in 1856, Colonel in 1881, General of Division in 1895, member of the Committee on Cavalry, and put in

FIG. 3.—Facsimile of introductory page. Note the expression, in the text, of Osler's avowed preference for "bio-bibliography." (Illustrating Rubric II. 1).

Hæmoglobinuria. (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 76-77.

Discusses probability that this is not a nephritis but a blood disease due to primary destruction of the red corpuscles, and dissolution of hæmoglobin. The relation of this affection to azoturia of the horse is then discussed.

1886

Contagious pleuro-pneumonia. (Unsigned editorial.) *Med. News,* Phila., 1886, xlix, 379.

Urges legislative action for eradication of this infection, the existence of which in Chicago, threatened to plunge the country into all the horrors of a European cattle plague.

[The Journal of Comparative Medicine and Surgery.] (Unsigned **editorial.**) *Med. News,* Phila., 1886, xlix, 523.

Announces the transfer of this periodical to Philadelphia under the editorship of Huidekoper and Conklin.

1887

(The Journal of Comparative Medicine, 1887, viii, No. 1, Jan. Edited by W. A. Conklin and Rush S. Huidekoper. Philadelphia: A. L. Hummel.) Unsigned **book review.** *Med. News,* Phila., 1887, l, 244.

1888

The Hendon cow disease and scarlet fever. (Unsigned editorial). *Med. News,* Phila., 1888, lii, 20.

On a scarlatiniform epidemic, transmissible to man, proved by Crookshank and others to be cowpox.

Spontaneous and experimental typhoid fever in animals. (Unsigned editorial.) *Med. News,* Phila., 1888, lii, 641.

OXFORD PERIOD

(1905-1919)

1914

[On the resolution that further research in swine-fever should be undertaken at one or more university centres as well as at the Government Laboratory at Alperton.] **Remarks** in discussion. *The Times,* Lond., May, 1914.

1918

(Essai de bibliographie hippique, by General Mennessier de la Lance. Paris: Lucien Dorbon, 1915-1917. Edinburgh & London: Green & Son, 1918, 4 pp. 8°.) **Book review.** *Veterinary Rev.,* Lond., 1918, ii, No. 1. [*In his:* C. r., 1907-20, vi, No. 319.]

In this review Osler wrote "as a former teacher in a Veterinary College."

II. PATHOLOGY: 2. HUMAN

CANADIAN PERIOD

(1869-1884)

1872

Carcinoma mammæ. Removal by excision. (Under care of Dr. D. C. MacCallum.) Reported by Mr. W. Osler.[4] *Canada M. J.*, Montreal, 1872, viii, 107-109.

Gives gross and microscopic appearances.

Pleuro-pneumonia with delirium tremens. Death. Autopsy. (Under care of Dr. D. C. MacCallum.) Reported by Mr. W. Osler. *Canada M. J.*, Montreal, 1872, viii, 119-122.

The autopsy, evidently Osler's, contains a remarkable study of an old renal infarct.

(On paralysis with aphasia, by Dr. John Reddy, who read the paper and demonstrated the specimen before the Medico-Chirurgical Society of Montreal, March 9, 1872.) **Specimen,** from the first of the four cases reported, prepared by W. Osler. *Canada M. J.*, Montreal, 1871-72, viii, 407-408.

"I am much indebted to Mr. William Osler, who assisted me at the post mortem, and who has kindly made me this very valuable wet preparation by which you will be enabled readily to perceive the clot *in situ* in the arteries." (Drawing of same also published).

[Graduation thesis on pathological anatomy.] (Unpublished.) Statement in *Canada M. J.*, Montreal, 1872, viii, 473-474.

Awarded a special prize at the Convocation held Mar. 28, 1872, Dr. Osler graduating second in his class. Thirty-three microscopic and other preparations of morbid anatomy accompanying the thesis, were presented by the author to the museum of the Faculty.

1874

Uterine thermometry. (Initialled abstract.) *Canada M. & S. J.*, Montreal, 1874-75, iii, 294-297.

This is an extended abstract of Cohnheim's *Die Thermometrie des Uterus* (*Virchow's Arch.*, lxii, No. i, 141-144), in which the author deals with the determination of a living or dead fœtus by comparison of the uterine and vaginal temperatures.

1875

***On the pathology of miner's lung.** *Canada M. & S. J.*, Montreal, 1875-76, iv, 145-168 (6 text-cuts). *Abstr.: Rept. Dis. Chest.*, (Dobell), London; Smith, Elder & Co., 1876, ii, 1-12. [*In his:* C. r., 1870-82, i, No. 7.]

A classic study based on a then recent case of his own and other specimens in the McGill Museum illustrating the pathology of lung

*Specimens in the Medical Museum of McGill University.

pigmentation, and on the results of several experiments (two are given in detail)—carried out on the distribution of India-ink pigment after the injection of the lymphatics of kittens.

1876

(Removal of a lymphoma from the right side of the neck [2 illus.] by Dr. W. E. Bessey. Medico-Chirurgical Society of Montreal, Jan. 28, 1876.) **General and histological description of the tumour**, by Dr. Osler. *Canada M. Rec.*, Montreal, 1875-76, iv, 122. *Also, Canada Lancet*, Toronto, 1876, viii, 257-258.

(A case of melano-sarcoma of the choroid, (1 illus.), by Dr. A. Proudfoot.) **Histological characters of the tumour.** By Prof. Osler. *Canada M. & S. J.*, Montreal, 1875-76, iv, 298-300. *Also, Canada M. Rec.*, Montreal, 1875-76, iv, 85-86.

(Case of glioma of both retinæ. Extirpation of both eyes, [2 illus.], by Prof. G. E. Fenwick.) **Histological and general description of the tumours**, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1875-76, iv, 306-308.

Notice of the recent researches on the pathology of small-pox. **(Retrospect.)** *Canada M. & S. J.*, Montreal, 1875-76, iv, 341-343.

(Case of leucocythæmia—history and autopsy, by John Bell, A.M., M.D.) **Remarks on histology of above case**, by Dr. William Osler. *Canada M. & S. J.*, Montreal, 1875-76, iv, 439-447. [*In his:* C. r., 1870-82, i, No. 6.]

(Case of acute fibrinous bronchitis, with expectoration of tube casts, by Dr. E. D. Worthington.) **Microscopical examination** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1875-76, iv, 539.

(Case of cirrhosis of the liver, with enlargement, by Dr. Roddick. Reported by Mr. James Bell.) **Pathological Report** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1876-77, v, 24-26. **Autopsy** in *Montreal Gen. Hosp. Path. Rept.*, No. I, (1876-77), 1878, 56-60, Case i. *Also, Canada M. & S. J.*, Montreal, 1877-78, vi, 249-253.

*(Case of cerebral aneurism, by Dr. John Bell.) **Autopsy**, by Dr. Osler (1 outline drawing). *Canada M. & S. J.*, Montreal, 1876-77, v, 57-58. *Also*, in *Montreal Gen. Hosp. Path. Rept.*, No. I, (1876-77), 1878, 30-32. Case ix, (1 outline cut).

(Case of pneumonia with acute meningitis, by Dr. J. Reddy. Reported by Mr. James Bell.) **Autopsy** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1876-77, v, 62-65. *Also*, in *Montreal Gen. Hosp. Path. Rept.*, No. I, (1876-77), 1878, 33-34, Case x.

*(Aneurism of the arch of the aorta—pressure on the great veins—death and autopsy, clinical report by Mr. R. W. Powell for Dr. Roddick.) **Autopsy**, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1876-77, v, 180-181.

(Case of tubercular meningitis, under Dr. Ross; clinical report by C. L. Cotton.) **Autopsy**, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1876-77, v, 260-262. *Also*, in *Montreal Gen. Hosp. Path. Rept.*, No. I., (1876-77), 1878, 81-82, Case xliii.

(Cases of pernicious progressive anæmia, etc., by Dr. R. P. Howard.) **Autopsy** by Dr. Osler. *Tr. Internat. M. Cong.*, Phila., 1876, (1877), 435.

*Specimen in the Medical Museum of McGill University.

[Report from Canada.] (Retrospect.) *Annual reports on diseases of the chest, under the direction of Horace Dobell,* (1875-76), London: Smith, Elder & Co., 1876, ii, 1-12.

This interesting publication ran for three years and contained "Reports from Coadjutors" in Russia, Spain, Italy, Australia, Japan, China, United States of America, United Kingdom of Great Britain and Ireland, British Kaffraria, Austria-Hungary, and Germany, as well as Canada, thus presenting one of the very earliest "International" reviews ever published. "Report from Canada", by William Osler, M.D., L.R.C.P., Professor of the Institutes of Medicine, McGill University, appears as the leading item in Volume ii, and occupies a prominent place also in Volume iii. It is absent in Volume i. Among the articles reviewed in Volume ii are those by Dr. Worthington on "Acute Fibrinous Bronchitis," and on "Excavation of the Whole of One Lung," by Dr. Reddy, cited above, with autopsies by Dr. Osler, and his own article on "The Pathology of Miner's Lung," (*Canada M. & S. J.*, Montreal, 1875-76, iv, 145-168), which is quoted *in extenso.*

1877

(*Case of epithelioma of the tongue, under Dr. Ross, reported by Mr. John Brodie.) **Autopsy,** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1876-77, v, 337-341. *Also,* in *Montreal Gen. Hosp. Path. Rept.*, No. I, (1876-77), 1878, 41-42, Case xlv.

(Case of fibroid contraction of the right lung with displacement of the heart; tricuspid regurgitation; albuminuria, by Dr. Ross. Reported by Mr. C. L. Cotton.) **Autopsy,** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1876-77, v, 347-349. *Also, Montreal Gen. Hosp. Path. Rept.*, No. I, (1876-77), 1878, 38-39, Case xxxviii.

Case of progressive pernicious anæmia (idiopathic of Addison.) (With William Gardner.) *Canada M. & S. J.*, Montreal, 1876-77, v, 385-404. [*In his:* C. r., 1870-82, i, No. 15.] *Also,* **autopsy,** in *Montreal Gen. Hosp. Path. Rept.*, No. I, (1876-77), 1878, 84,-94, Case lxi. *Abstr.:* **Ueber die Beschaffenheit des Blutes und Knochenmarkes in der progressiven perniciösen anämie.** (With William Gardner.) *Centralbl. f. d. med. Wissensch.*, Berl., 1877, No. 15, 258-260. [*In his:* C. r., 1870-82, i, No. 17.]

Contains a full microscopic study of the blood and bone marrow; concludes that the latter is the "*fons et origo mali.*"

(Cancer of the liver; gallstones; obstruction of common bile duct, etc., by John Bell, A.M., M.D.) **Autopsy,** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1876-77, v, 437-439. *Also,* in *Montreal Gen. Hosp. Path. Rept.*, No. I., (1876-77), 1878, 64-65, Case lxxxiv.

(Acute Bright's disease, accompanying pregnancy; miscarriage, peritonitis, death, by Dr. Ross. Reported by Mr. C. L. Cotton.) **Autopsy,** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1876-77, v, 445-447.

The microscopist, a manual of microscopy and compendium of the microscopic sciences, by J. H. Wythe. Philadelphia, Lindsay & Blakiston, 3. ed., 1877, 260 pp., 205 illust. (Unsigned **book review.**) *Canada M. & S. J.*, Montreal, 1876-77, v, 553-555.

This review begins with the statement that, "The first edition of this work was well known to us ten years ago, when beginning our microscopical studies."

*Specimen in the Medical Museum of McGill University.

*Aneurism of the hepatic artery with multiple abscesses of the liver. By George Ross, A.M., M.D., and William Osler, M.D., L.R.C.P. (Presented, Medico-Chirurgical Society of Montreal, April 27, 1876.) *Canada M. & S. J.*, Montreal, 1877-78, vi, 1-12, (with plate). **Autopsy**, *also* in *Montreal Gen. Hosp. Path. Rept.*, No. I., (1876-77), 1878, 22-30, Case liii, (Frontispiece). *Full Abstr.: Am. J. M. Sc.*, Phila., 1877, lxxiv, 565-570. *Review* by Grawitz, *Centralbl. f. d. med. Wissensch.*, Berl., Feb., 1878, xvi, 94. [*In his:* C. r., 1870-82, i, No. 13.]

Case of progressive pernicious anæmia. (With John Bell, A.M., M.D.) Pathological report, with remarks, by Dr. Osler. Presented, Canada Medical Association, Montreal, Sept. 12, 1877. *Tr. Canada M. Ass.*, 1877, i, 131-140. *Also*, in *Montreal Gen. Hosp. Path. Rept.*, No. I., (1876-77), 1878, Case xcvii. [*In his:* C. r., 1870-82, i, No. 16.] *Abstr.* **Beschaffenheit des Blutes und Knochenmarkes bei perniciösen Anämie.** *Centralbl. f. d. med. Wissensch.*, Berl., July 14, 1877, xv, 498. [*In his:* C. r., 1870-82, i, No. 18.] **Reviews** in *Lancet*, Lond., Aug. 3, 1878, ii, 162. *Also, Canada M. & S. J.*, Montreal, 1877-78, vii, 95.

*(Two cases of stenosis of the tricuspid orifice, with observations, by Dr. R. P. Howard. Presented Canada Medical Association, Montreal, Sept. 12, 1877.) **Autopsy** by Dr. Osler. *Tr. Canada M. Assoc.*, Montreal, 1877, i, 111-114.

I. Miliary aneurisms of cerebral vessels; II. *Diphtheritic disease of larynx; III. Blood cast of ureter; IV. Two specimens of prostatic disease; V. Kidney from case of diphtheria. (**Specimens presented**, Medico-Chirurgical Society of Montreal, May 26, 1877.) Rept. *Canada M. & S. J.*, Montreal, 1877-78, vi, 45-46.

One of the prostatic specimens was exhibited for Dr. Malloch of Perth, the other for Dr. Fenwick.

(Malignant disease of eyeball, by Dr. Trenholme. Presented Medico-Chirurgical Society of Montreal, May 26, 1877.) **Discussion** by Dr. Osler. Rept. *Canada M. & S. J.*, Montreal, 1877-78, vi, 46.

*(A case of valvular disease of the heart, by Dr. John Reddy.) **Autopsy**, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1877-78, vi, 62-63.

(An endemic of typhus fever in Montreal, by J. D. Cline.) (One chart.) **Autopsy**, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1877-78, vi, 147-149.

Dr. Cline was a brilliant young house-physician of great promise, whose tragic death of diphtheria in 1882, was the cause of much grief to his associates. He is mentioned several times in Osler's writings.

*(Case of aneurism of the innominate artery, proposed ligature of carotid, refusal of patient, subsequent death and autopsy. Case under Dr. Fenwick. Reported by Mr. J. J. Guerin.) **Autopsy**, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1877-78, vi, 222-223.

Cases in the *Montreal General Hospital Pathological Report*, No. I for the year ending May 1st, 1877, (**not published elsewhere**). Montreal, Dawson Bros., Publishers, 1878. **Fracture of first and second ribs near heads**, 11-12. **Necrosis of tibia—pyæmia**, 12-13. **Necrosis of femur—pyæmia**, 13-14. **Cancer of second and third vertebræ, and corresponding ribs on right side**, 14-16. *Idiopathic (so-called) **hypertrophy and dilatation of heart**, 16-20. **Fenestration of valves of aorta and pul-**

*Specimen in the Medical Museum of McGill University.

monary artery, 20. Atheroma, 20. Aneurism of first part of thoracic aorta, 20-21. Sacculated aneurism of ascending portion of arch of aorta, 21. Sacculated aneurism of aorta at termination of the arch, 22. *Aneurisms on branches of pulmonary arteries on walls of phthisical cavities, 30. Ossification of mucous membrane of trachea, 32. Hepatization of left lung—diphtheritic colitis, 34. Pneumonia about a phthisical cavity in right lung in diabetes, 34-35. Chronic phthisis—pneumonia of healthy portion, 35. Simple pneumonia of left lung, right-sided pleurisy, 35. Pneumonia of right lung, uniform involvement of pleura, 35-37. Gangrene about phthisical cavities in left lung, 37. Chronic phthisis; perforation; pneumothorax, 39-40. Chronic phthisis—cancer of vertebræ and ribs, 39-40. Small fibroid thickenings on visceral layer of pleura, 40-41. Pleurisy, 41. Suppuration of portal vein, empyema, 41. Epithelioma of tongue, secondary nodules in liver, 42. Miliary tuberculosis of pharynx, 42-43. Post-mortem digestion, 43. Cancer of cardiac orifice, 43-44. Medullary cancer—perforation, 44. Incarceration of ileum, 45-46. Round ulcer of duodenum, 45. Typhoid ulcer—perforation (3 cases), 46-48. Typhoid fever, slight ulceration (2 cases), 48-49. Round ulcer of cæcum—perforation, 49-50. Concretions in appendix, 50. Perforation of appendix, 51. Acute peritonitis, 51. Tubercular peritonitis, 52-56. *Syphilitic ulceration of frontal bone—gummata of liver, 60-61. Primary cancer of liver, 61-63. Secondary cancer of liver, primary of gall-bladder, 63-65. Suppuration of portal vein following typhoid, perforation of appendix, abscesses in mesentery, empyema, 65-71. Variations in spleen, 71. Tuberculous disease of kidney (3 cases), 72-75. Perinephritic abscess, 75-76. Pyelitis consequent on stone in bladder, and pyelonephritis, 76-77. Epithelioma of cervix uteri—pyometra, 77-78. Dermoid cyst of ovary, 78-79. Generalized tuberculosis—spinal meninges affected, 79-81. Meningeal affection slight. Ventricles distended, walls soft. Very few miliary tubercles in the organs, 81-82. Meningeal affection very extensive on the cortex, slight at the base. Ventricles large, walls not soft. Large caseous mass in left lung. Miliary tubercles in lungs and on peritonæum, 82-83. Slight meningeal inflammation. One caseous mass and a few tubercles in lungs. Old morbus coxæ, 84. Profound anæmia without discoverable lesion. Fatty degeneration of organs. Hyperplasia of bone-marrow, (two cases), 84-93; 94-97.

The above titles of the cases in this report are published here for the purpose of correlation with Miss Blogg's Bibliography, in which they appear as separate items. Such cases as were published elsewhere as well, are omitted from this list and appear incorporated with other references as separate items above. The cases are listed under 1877 although the volume itself did not appear until 1878, because the Report was first published in the *Canada M. & S. J.*, 1877-78, vi, 12-17; 52-55; 110-116; 152-163; 249-261.

1878

[Report from Canada.] (Retrospect.) *Annual reports on diseases of the chest, under the direction of Horace Dobell,* (1876-77), London: Smith, Elder & Co., 1878, iii, 51-55.

Osler reports here his own papers on the respiratory system in hæmorrhagic small-pox, fatty degeneration of the heart in pernicious anæmia, (*Canada M. & S. J.*, Montreal, March, 1877,) aneurisms of the aorta, the Pathological Report No. I of the Montreal General Hospital, and small aneurisms of branches of pulmonary artery.

*Specimen in the Medical Museum of McGill University.

*Overstrain of the heart as illustrated by a case of hypertrophy, dilatation and fatty degeneration consequent upon prolonged muscular exertion. (Presented, Medico-Chirurgical Society of Montreal.) *Canada M. & S. J.*, Montreal, 1877-78, vi, 385-395. **Autopsy**, in *Montreal Gen. Path. Rept.*, No. I, (1876-77), 1878, Case xliv, 16. [*In his:* C. r., 1870-82, i, No. 19.]

(Case of encephaloid cancer of the axillary glands, with secondary deposits in all the internal organs, by Dr. Fenwick. Reported by Dr. James Bell.) **Autopsy**, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1877-78, vi, 541-545. Autopsy also given under title—**Medullary sarcoma of axillary glands—secondary masses in heart, lungs, stomach, intestines,** liver, spleen, kidneys, supra-renal capsules and pancreas, in Montreal Gen. Hosp. Path. Rept., No. II, [in *Montreal Gen. Hosp. Clin. & Path. Repts.*, (1877-79), 1880, i, 336-339.]

I. Arteritis obliterans of anterior tibial artery, dry gangrene of foot; II. Uterus and ovaries fourteen days after menstruation, showing a fresh corpus luteum. (**Specimens presented**, McGill Medical Society, April 27, 1878.) Rept. *Canada M. & S. J.*, Montreal, 1877-78, vi, 526-528.

Sarcoma of retroperitoneal glands—Lobstein cancer. I. Case of Dr. Malloch of Hamilton; II. Case of Dr. Gardner; **autopsy** in Montreal Gen. Hosp. Path. Rept., No. II, [in *M. G. H. Repts. Clin. & Path.*, 1880, i, 339-340.] **Specimens presented**, McGill Medical Society of Montreal, **May 4, 1878. Rept.** *Canada M. & S. J.*, Montreal, 1877-78, vi, 570. ***Also, Edit.* on I,** *Canada M. & S. J.*, Montreal, 1876-77, v, 473-474.

Lympho-sarcoma of deep cervical glands, involving the thyroid and simulating goitre. Autopsy in Montreal Gen. Hosp. Path. Rept. No. II, [in *Montreal Gen. Hosp. Clin. & Path. Repts.*, 1880, i, 340-342.] (Specimen presented, McGill Medical Society, May 4, 1878. Rept. *Canada M. & S. J.*, Montreal, 1877-78, vi, 570.)

Extensive scald of thorax—pneumonia—numerous spots of fatty degeneration in kidneys. (Specimen presented, McGill Medical Society, May 4, 1878. Rept. *Canada M. & S. J.*, Montreal, 1877-78, vi, 570.) **Autopsy** in Montreal Gen. Hosp. Path. Rept., No. II, [in *Montreal Gen. Hosp. Repts., Clin. & Path.*, 1880, i, 321-322.]

I. Dry gangrene of finger of child after carbolic acid; II. Thoracic duct from case of acute generalized miliary tubercle, obstructed by chronic inflammation of the intima and distended with fluid containing red blood corpuscles; III. Section of bone-marrow from case of anæmia; IV. Taenia medio-canellata from eating measly beef. (**Specimens presented**, McGill Medical Society, May 11 and 18, 1878.) Rept. *Canada M. & S. J.*, Montreal, 1877-78, vi, 571, 573.

I. Congenital pulmonary stenosis with patent ductus; II. Hypertrophy of heart without valvular disease or emphysema; III. Intestines on the 20th day of typhoid fever. **Specimens presented**, McGill Medical Society, Oct. 4, 1878. Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 18.

I. Apical pneumonia, meningitis, endocarditis; II. Cirrhosis of liver; III. Lungs in phthisis. (**Specimens presented**, Medico-Chirurgical Society of Montreal, Nov. 1, 1878.) Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 52.

Case of extra-uterine pregnancy, death. (With Drs. R. A. Kennedy and G. Ross. Presented Medico-Chirurgical Society of Montreal, Dec. 13, 1878.) *Canada M. Rec.*, Montreal, 1878-79, vii, 65-68. **Autopsy** *also* in

*Specimen in the Medical Museum of McGill University.

Montreal Gen. Hosp. Path. Rept., No. II, [in *Montreal Gen. Hosp. Repts., Clin. & Path.*, 1880, i, 333-335.]

I. Liver of hypertrophic cirrhosis (with microscopic slides); II. Liver in atrophic cirrhosis; III. *Gastric ulcer with eroded arterial branches in floor. (**Specimens presented**, Medico-Chirurgical Society of Montreal, Nov. 15, 1878.) Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 79.

1879

I. Liver in atrophic cirrhosis; II. Kidney from acute Bright's disease; III. *Stricture of urethra, chronic cystitis and surgical kidney; hypertrophy, and diverticulæ of bladder. (**Specimens presented**, Medico-Chirurgical Society of Montreal, Jan. 10, 1879.) Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 131.

I. Disease of the right vertebral artery leading to aneurismal dilatation, rupture, meningeal hæmorrhage; II. Meckel's diverticulum; III. Dilated stomach in cicatricial contraction of ulcer at pylorus; IV. Cirrhosis of liver; V. Gallstone at orifice of common duct. (**Specimens presented.** Medico-Chirurgical Society of Montreal, Feb. 7, 1879.) Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 134-135.

(Case of malignant epulis, demanding partial removal of superior maxillary bones—recovery, by Dr. Roddick; reported by T. Gray.) Microscopical examination of the tumour by Dr. Osler. *Canada M. & S. J.*, Montreal, 1878-79, vii, 362.

Perihepatitis with cirrhosis. (Specimen presented, Medico-Chirurgical Society of Montreal, Feb. 21, 1879.) Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 163.

I. Chronic morbus Brightii; II. Fibro-sarcoma of the testicle; III. *Pachymeningitis; IV. Cancer of stomach; V. Fibroid of uterus; VI. Endocarditis. (**Specimens presented**, Medico-Chirurgical Society of Montreal, March 7, 1879.) Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 191.

Case of obliteration of vena cava inferior with great stenosis of orfices of hepatic veins. *J. Anat. & Physiol.*, Lond., 1878-79, xiii, 291-304. Edinburgh: Neill & Co., 1879, 16 pp., 8°. (**Specimen presented**, Medico-Chirurgical Society of Montreal, Jan. 23, 1879. Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 132-133.) *Abstr.: Am. J. M. Sc.*, Phila., 1879, n. s., lxxviii, 239-240. [*In his:* C. r., 1870-82, i, No. 24.]

Cohnheim's theory of tumours. Translated and condensed from vol i of his *Vorlesungen ueber allgemeine Pathologie* (Lectures upon General Pathology.) *Canada M. & S. J.*, Montreal, 1878-79, vii, 337-347; 398-408. (Read before the Medico-Chirurgical Society of Montreal, Feb. 21, 1879, as an appendix to a report on "Two cases of rare kidney tumours"—striped-muscle sarcoma, and spindle-celled adeno-sarcoma, listed below. Rept. *Canada M. & S. J.*, Montreal, 1879-80, viii, 169. *Also, Canada M. Rec.*, Montreal, 1878-79, vii, 164.)

(Fracture of the patella, pleuro-pneumonia during convalescence: thrombosis of pulmonary artery, by Dr. Thos. G. Rodger.) Autopsy, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1878-79, vii, 449. *Also,* Montreal Gen. Hosp. Path. Rept., No. II, [in *Montreal Gen. Hosp. Clin. & Path. Repts.*, 1880, i, 285-287.]

I. Miners' phthisis. Reported by Mr. Rankine Dawson. **Medical case under Dr. Osler.** *Canada M. & S. J.*, Montreal, 1878-79, vii, 452-454.

*Specimen in the Medical Museum of McGill University.

Also, Montreal Gen. Hosp. Path. Rept., No. II, [in *Montreal Gen. Hosp. Clin. & Path. Repts.,* 1880, i, 297-299.]

Supplements the case reported by Osler in this Journal in 1875.

Ruptured follicle in right ovary; peritonitis. (**Specimen presented,** Medico-Chirurgical Society of Montreal, March 21, 1879. Rept. *Canada M. Rec.,* Montreal, 1878-79, vii, 216.) **Autopsy,** in Montreal Gen. Hosp. Path. Rept., No. II, (1877-79), [in *Montreal Gen. Hosp. Repts., Clin. & Path.,* 1880, i, 331-333.]

I. Cirrhosis of liver; II. Intestine in typhoid fever; III. Fibroid pthisis; IV. Large cirrhotic kidneys. (**Specimens presented,** Medico-Chirurgical Society of Montreal, March 21, 1879.) Rept. *Canada M. Rec.,* Montreal, 1878-79, vii, 216.

I. *Cancer of the pyloric zone of stomach; II. Pharnyx, larynx, trachea and bronchi in diphtheria [2 cases]; III. Primary sarcoma of kidney. (**Specimens presented,** Medico-Chirurgical Society of Montreal, April 1879.) Rept. *Canada M. Rec.,* Montreal, 1878-79, vii, 218.

(Statistics of pneumonia at the Montreal General Hospital from 1874-1879, by Dr. Oakley. Medico-Chirurgical Society of Montreal, April 4, 1879.) **Discussion** by Dr. Osler. Rept. *Canada M. Rec.,* 1878-79, vii, 218.

I. Empyema; II. Sarcoma of the breast; III. Scirrhus carcinoma of the breast; IV. Ovary at the fifth month of gestation; V. Primary cancer of liver. (**Specimens presented,** Medico-Chirurgical Society of Montreal, April 18, 1879.) Rept. *Canada M. Rec.,* Montreal, 1878-79, vii, 219.

I. Miner's lung; II. Atrophy of kidney. (**Specimens presented,** Medico-Chirurgical Society of Montreal, May 2, 1879.) *Canada M. Rec.,* Montreal, 1878-79, vii, 220.

Amyloid kidney in syphilitic disease of rectum. (**Specimens presented,** Medico-Chirurgical Society of Montreal, May 16, 1879.) Rept. *Canada M. & S. J.,* Montreal, 1878-79, vii, 495. *Also, Canada M. Rec.,* Montreal, 1878-79, vii, 246.

I. Monstrosity, anencephalic monster; II. Postpartum pseudo-diphtheritic endometritis. (**Specimens presented,** Medico-Chirurgical Society of Montreal, May 30, 1879.) Rept. *Canada M. & S. J.,* Montreal, 1878-79, vii, 496-497. *Also, Canada M. Rec.,* Montreal, 1878-79, vii, 247.

*(Strangulated oblique inguinal hernia, congenital—operation, death, by Dr. Fenwick; reported by Dr. A. W. Imrie.) **Autopsy,** by Dr. Osler. *Canada M. & S. J.,* Montreal, 1878-79, vii, 490-491. *Also,* (autopsy) under title **Cryptorchidismus,** in Montreal Gen. Hosp. Path. Rept. No. II, [in *Montreal Gen. Hosp. Path. & Clin. Repts.,* (1877-79), 1880, i, 335-336.] (**Specimen presented,** Medico-Chirurgical Society of Montreal, June 13, 1879.) Rept. *Canada M. Rec.,* Montreal, 1878-79, vii, 274-275.

I. *(Right pyonephrosis from constriction of ureter in cancer of neck of uterus, by Dr. Alloway. **Specimens presented,** Medico-Chirurgical Society of Montreal, June 15, 1879. Rept. *Canada M. Rec.,* Montreal, 1878-79, vii, 274-275.) **Autopsy** in Montreal Gen. Hosp. Path. Rept. No. II, [in *Montreal Gen. Hosp. Repts., Clin. & Path.,* 1880, i, 329-331.]

*Perforating ulcer of stomach immediately at the pyloric ring. (**Specimen presented,** Medico-Chirurgical Society of Montreal, July 25, 1879.) Rept. *Canada M. Rec.,* Montreal, 1878-79, vii, 304. *Also, Canada M. & S. J.,* Montreal, 1879-80, viii, 16.

*Specimen in the Medical Museum of McGill University.

*Mitral stenosis; embolism of the right cerebral artery. (**Specimen presented,** Medico-Chirurgical Society of Montreal, Aug. 22, 1879.) Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 336.

Case of congenital and progressive hypertrophy of the right upper extremity. *J. Anat. & Physiol.*, Lon., 1879-80, xiv, 10-12. *Abstr.: Med. News*, Phila., 1880, xxxviii, 267. *Also, Lond. Med. Rec.*, March 15, 1880, viii, 109-110. [*In his:* C. r., 1870-82, i, 25.]

(Fibroid phthisis—dilatation and hypertrophy of heart—dropsy—amyloid degeneration of liver and spleen. **Medical case** under Dr. Osler. Report by Mr. T. W. Reynolds.) *Canada M. & S. J.*, Montreal, 1879-80, viii, 111-114.

(On duodenal ulcer, by F. W. Campbell, Canada Medical Association, Sept. 11, 1879.) **Discussion,** by Dr. Osler. *Canada Lancet*, Toronto, 1879-80, xii, 58.

Organs from a case of corrosive sublimate poisoning. (**Specimens presented,** Medico-Chirurgical Society of Montreal, Oct. 3, 1879.) Rept. *Canada M. & S. J.*, Montreal, 1879-80, viii, 167. *Also, Canada M. Rec.*, Montreal, 1879-80, viii, 24-25.

I. Cirrhosis of the liver with thrombosis of the portal vein; II. *Perforation of the intestine in typhoid fever. (**Specimens presented,** Medico-Chirurgical Society of Montreal, Oct. 17, 1879.) Rept. *Canada M. Rec.*, Montreal, 1879-80, viii, 55.

I. Multilocular ovarian tumour, with dermoids; II. Chronic valvular endocarditis—aortic insufficiency—hypertrophy and dilatation of heart. (**Specimens presented,** Medico-Chirurgical Society of Montreal, Oct. 31, 1879.) Rept. *Canada M. & S. J.*, Montreal, 1879-80, viii, 223. *Also, Canada M. Rec.*, Montreal, 1879-80, viii, 56.

Croup or diphtheria. Which? *Canada M. & S. J.*, Montreal, 1879-80, viii, 207-211. (**Specimen presented,** Medico-Chirurgical Society of Montreal, Nov. 14, 1879. Rept. with **discussion,** *Ibid*, 224-225.) [*In his:* C. r., 1870-82, i, 23.]

Perforation of bowels in typhoid fever. (**Specimen presented,** Medico-Chirurgical Society of Montreal, Nov. 14, 1879.) Rept. *Canada M. & S. J.*, Montreal, 1879-80, viii, 224.

1880

Two cases of striated myo-sarcoma of the kidney. *J. Anat. & Physiol.*, Lond., 1879-80, xiv, 229-233. (One specimen presented under title, "Two cases of rare kidney tumours", Medico-Chirurgical Society of Montreal, February 21, 1879. Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 164.) (The other presented under title, "Striated myo-sarcoma of kidney", Oct. 3, 1879. Rept. *Canada M. & S. J.*, Montreal, 1879-80, viii, 168.) [*In his:* C. r., 1870-82, i, No. 26.]

A translation of the greater part of Cohnheim's "Theory of Tumours" was published as an appendix to this article, and appears as an "Original Communication" in the *Canada M. & S. J.*, Montreal, 1878-79, vii, 337-347; 398-408. (Listed above.)

Three cases of brain disease. *Canada M. & S. J.*, Montreal, 1879-80, viii, 295-304; 346-349. (Read before Medico-Chirurgical Society of Montreal, Nov. 14, 1879. Rept. *Ibid.*, 226.)

On Giacomini's method of preserving the brain. (Diagrams and specimens presented, Medico-Chirurgical Society of Montreal, July 25,

*Specimen in the Medical Museum of McGill University.

1879. Rept. *Canada M. & S. J.*, Montreal, 1879-80, viii, 16-17.) *J. Anat. & Physiol.*, Lond., 1879-80, xiv, 144. *Also, Med. Rec.*, N. Y., 1880 xvii, 315-316: *Canada M. Rec.*, Montreal, 1878-79, vii, 304. *Abstr: Canad. J. M. Sc.*, Toronto, 1880, v, 125-127.

Dr. Osler also demonstrated the method before the Canada Medical Association (Sept. 11, 1879), and the American Association for the Advancement of Science at Montreal (Aug. 25, 1882).

I. *Pneumonic phthisis; II. Aneurism of anterior communicating branch of circle of Willis; rupture. (**Specimens presented,** Medico-Chirurgical Society of Montreal, December 12, 1879. Rept. *Canada M. Rec.*, Montreal, 1879-80, viii, 112.) **Autopsies** in Montreal Gen. Hosp. Path. Rept., No. II, (1877-79), [in *Montreal Gen. Hosp. Repts., Clin. & Path.*, 1880, i, 272-275; 295-297.]

I. Large white kidney in acute Bright's disease; II. *Obturator hernia; III. Diphtheritic inflammation of vagina, bladder, and pelvis of kidneys in typhoid fever; IV. Tumour of the brain; V. Fibrous concretions in the heart. (**Specimens presented,** Medico-Chirurgical Society of Montreal, Dec. 29, 1879 and Jan. 9, 1880.) Rept. *Canada M. Rec.*, Montreal, 1879-80, viii, 138-139.

I. *Two cases of adherent pericardium—endocarditis—incompetency of the valves; II. *Mitral stenosis; III. Tumour of the thyroid; IV. Cancerous tumour involving both ovaries; V. Dermoid cyst. (**Specimens presented,** Medico-Chirurgical Society of Montreal, March 19, 1880.) Rept. *Canada M. Rec.*, Montreal, 1879-80, viii, 194. *Also, Canada M. & S. J.*, Montreal, 1879-80, viii, 449.

I. *Aneurismal dilatation of the arch of the aorta; II. Congenital deficiency of rectum. (**Specimens presented,** Medico-Chirurgical Society of Montreal, April 9, 1880.) Rept. *Canada M. & S. J.*, Montreal, 1880-81, viii, 452-453.

*(A case of fibroid disease of the heart, with observations upon the general pathology of fibrosis, by Dr. R. P. Howard. Presented, Medico-Chirurgical Society of Montreal, April 30, 1880.) **Autopsy,** by Dr Osler. *Canada M. & S. J.*, Montreal, 1879-80, viii, 532-534. Rept. *Ibid*, 519.

Anomalous case of pyæmia; suppuration about tissues in left inferior carotid triangle; pyæmic abscess beneath tensor vaginæ femoris; pyæmic infarcts in lungs; septic pleurisy. **Medical case under Dr. Osler.** (Reported by J. B. Harvie.) *Canada M. & S. J.*, Montreal, 1879-80, viii, 544-548.

(*Case of pulmonary emphysema, associated with a "cured" aortic aneurism under the care of Dr. Ross. Rept. by Mr. W. A. Shufelt.) **Autopsy,** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1880-81, ix, 220. (**Specimen presented,** Medico-Chirurgical Society of Montreal, May 27, 1880. Rept., *Ibid*, 1879-80, viii, 556-558.

This specimen is mentioned in Osler's Practice of Medicine.

*(Aneurism of aorta, simulating one of the arteria innominata, by Dr. George Ross. Reported by Mr. B. E. McKenzie.) **Autopsy** by Dr. Osler. *Canada M. & S. J.*, 1880-81, ix, 22-23. (**Specimen presented,** Medico-Chirurgical Society of Montreal, April 9, 1880.) Rept. with discussion, *Canada M. & S. J.*, Montreal, 1879-80, viii, 451-452. *Also, Canada M. Rec.*, Montreal, 1879-80, viii, 196.

*Specimen in the Medical Museum of McGill University.

(Case of thoracic aneurism in an unusual situation: diagnosis aided by traction on the trachea. By Dr. George Ross.) **Autopsy** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1879-80, viii, 244-246. (**Specimen presented**, Medico-Chirurgical Society of Montreal, May 27, 1880. Rept. *Ibid*, p. 556.)

Cases of insular sclerosis, (1 illus.). *Canada M. & S. J.*, Montreal, 1880-81, ix, 1-11. (Read before Medico-Chirurgical Society of Montreal, June 25, 1880. Rept. *Ibid.*, 35.) [*In his:* C. r., 1870-82, i, No. 31.]

I. *Umbilical hernia; II. Miner's lung; III. Apoplexy into pons. **(Specimens presented**, Medico-Chirurgical Society of Montreal, June 11, and 25, 1880.) Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 32, 35.

"The third case of miner's lung met with in the General Hospital during the past three years."

(*Case of rupture of mitral valve, by Dr. John Reddy.) **Autopsy**, by Dr. Osler. *Montreal Gen. Hosp. Clin. & Path. Repts.*, 1880, i, 207-211.

(Hæmorrhage at base of brain, by Dr. Smith. Medico-Chirurgical Society of Montreal, June 11, 1880.) **Discussion**, by Dr. Osler. Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 33.

(Retroperitoneal cancer. **Medical case under Dr. Osler**; reported by Mr. J. W. Ross.) *Canada M. & S. J.*, Montreal, 1880-81, ix, 161-162.

(Two cases of pneumonia. Probable explanation of cerebral symptoms, by Dr. A. D. Blackader.) **Autopsy**, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1880-81, ix, 84.

On delayed resolution in pneumonia. *Canada Lancet*, Toronto, 1880-81, xiii, 99-103. (Abstract of paper read before the Medico-Chirurgical Society of Montreal, Nov. 12, 1880.) **Rept. with discussion**, *Canada M. & S. J.*, Montreal, 1880-81, ix, 352-355. [*In his:* C. r., 1870-82, i, No. 32.]

Morbid anatomy and terminations discussed: two cases reported with recovery. (Listed under III.)

Catalogue of a series of specimens illustrative of morbid anatomy of brain and spinal cord, exhibited at Ottawa meeting of Canada Medical Association, September 1 and 2, 1880, (by title). Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 106.

A contribution to the question of spastic spinal paralysis, (title only). (Read before Canada Medical Association, September 1, 1880.) Rept. *Canada Lancet*, Toronto, 1880-81, xiii, 45. *Also, Canada M. & S. J.*, Montreal, 1880-81, ix, 100. (**Specimen presented**, Medico-Chirurgical Society of Montreal, June 25, 1880. Rept. *Ibid.*, 34-35.)

Cases of cardiac abnormalities. I. *Premature closure of foramen ovale—general dropsy of fœtus; II. *Pulmonary and tricuspid stenosis; III. *Atresia of pulmonary orifice—hypertrophy of right ventricle—imperfection of septum ventriculorum—patent ductus arteriosus; IV. Descending aorta with left subclavian from right ventricle—innominate and left carotid from left ventricle—ventricular septum imperfect—fusion of segments of semilunar valves (with two plates). *Montreal Gen. Hosp. Repts. Clin. & Path.*, 1880, i, 177-192. [*In his:* C. r., 1870-82, i, No. 27.]

***On the condition of fusion of two segments of the semilunar valves.** (With one plate). *Montreal Gen. Hosp. Repts. Clin. & Path.*, 1880, I, 233-242. [*In his:* C. r., 1870-82, i, No. 28.]

*Specimen in the Medical Museum of McGill University.

Cases in the Montreal General Hospital Pathological Report, No. II, (Oct., 1877 to Oct., 1879), (not published elsewhere in this bibliography). In *Montreal Gen. Hosp. Clin. & Path. Repts.*, 1880, i, 253-342. Dawson Bros., Montreal. **Wound of the central part of the first and second frontal convolutions on left side,** 257-258. **Bullet wound of right frontal lobe,** 258-260. ***Aneurism of abdominal aorta—perforation of duodenum,** 260-261. ***Small aneurism of aorta compressing left bronchus,** 261-262. **Aneurism of thoracic aorta—rupture into left pleura,** 262-263. **Aneurism of arch of aorta—great hypertrophy of heart,** 263-265. **Aneurism of innominate—rupture of saccular dilatation of aorta into pericardium,** 265-266. **Aneurism of splenic artery—perforation into transverse colon,** 266-268. **Small aneurism of renal artery,** 268. **Four cases of intracranial aneurism: Aneurism of left middle cerebral artery, projecting into a cyst, probably the remains or an infarction—rupture—aortic valve disease; Endarteritis and aneurismal dilatation of left vertebral and first part of basilar arteries —rupture; Aneurism on left middle cerebral artery—old apoplectic cyst—numerous miliary aneurisms,** 268-271. ***Aneurisms of branches of pulmonary artery on wall of cavities—hæmoptysis in chronic phthisis,** 275-276. ***Two cases of hypertrophy of the heart,** 276-282. ***Perforation of pulmonary artery by ulcer of left bronchus—sudden death from hæmoptysis—chronic bronchitis, emphysema, phthisis,** 282-283. **Instance of four pulmonary valves,** 284. ***Bayonet-wound of left subclavian,** 284. **Fatty degeneration of heart in diphtheria—sudden death on thirteenth day,** 285. **Thrombosis of branches of right pulmonary artery,** 287-290. **Œdema of left lung; morphia poisoning,** 291-292. **Œdema of right lung; hydrothorax of left pleura; contracted kidneys,** 290. **Note on the occurrence of false membrane in the trachea and bronchi in diphtheria,** 299-300. **Pneumonia—ulcerative endocarditis —meningitis,** 292-295. ***Foreign body in œsophagus—ulceration—perforation—retropharyngeal and œsophageal abscess,** 300-301. **Three cases of cancer of the stomach,** 301-304. (One specimen presented, Medico-Chirurgical Society of Montreal, April 4, 1879. Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 218.) ***Three cases of ulcer of stomach,** 304-306. **Three cases of simple ulcer of duodenum,** 306-311. **Typhoid fever—rapidly fatal, with nervous symptoms,** 311-312. **Perforation of appendix vermiformis—circumscribed abscess—perforation of ileum—hæmorrhage from bowels,** 313-314. **Hydatid cyst of liver,** 314-316. **Primary cancer of liver,** 316-317. (Specimen presented, Medico-Chirurgical Society of Montreal, April 18, 1879. Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 219.) **Cirrhosis of liver—collateral circulation by means of an enlarged vein—death from pneumonia,** 317-318. **Pylephlebitis,** 318-321. **Small contracted kidneys—hypertrophy of heart,** 322-324. **Large cirrhotic kidneys—hypertrophy of heart—apoplexy,** 324-325. **Sarcoma of left kidney,** 325-328. **Dermoid of ovary —ulcerative colitis,** 328-329.

1881

Cases of medullary neuroma of the brain. *J. Anat. & Physiol.*, Lond., 1880-81, xv, 217-225. [*In his:* C. r., 1870-82, i, No. 35.]

Contains a fine plate showing the histological structure of twelve different types of nerve cells.

I. Pneumonia following fracture of the leg; II. Fatty overgrowth of heart. **(Specimens presented,** Medico-Chirurgical Society of Montreal, Nov. 12, 1880.) Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 352.

*Specimen in the Medical Museum of McGill University.

Cases of Hodgkin's disease (three in all.) *Canada M. & S. J.*, Montreal, 1880-81, ix, 385-397. [*In his:* C. r., 1870-82, i, No. 37.]

(Rheumatic purpura, by Dr. Molson. (Presented, Medico-Chirurgical Society of Montreal, Dec. 10, 1880.) **Discussion**, by Dr. Osler. Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 425.

I. Enlarged spleen from child aged sixteen months; II. Cerebral apoplexy showing distinct aneurysmal dilatation; III. Extreme fatty degeneration of the heart from anæmia. (**Specimens presented**, Medico-Chirurgical Society of Montreal, December 10, 1880.) *Canada M. & S. J.*, Montreal, 1880-81, ix, 425.

*Intussusception of bowel. (**Specimen presented**, Medico-Chirurgical Society of Montreal, January 7, 1881.) Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 426-427.

(Case of encephaloid disease of the testicle—operation. By Dr. G. M. Duncan.) **Histological description of the tumour** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1880-81, ix, 455-466.

*Hypertrophied heart with mitral stenosis in a case of chorea. (**Specimen presented**, Medico-Chirurgical Society of Montreal, February 4, 1881.) Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 485.

(*Case of chorea with recent endocarditis, by W. A. Molson.) **Specimen presented**, Medico-Chirurgical Society of Montreal, May 13, 1881.) **Autopsy**, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1880-81, ix, 651-652.

*Hydatidiform degeneration of chorion. (**Two specimens presented**, Medico-Chirurgical Society of Montreal, May 13, 1881.) *Canada M. & S. J.*, Montreal, 1880-81, ix, 671.

I. Aneurism of aorta rupturing into pulmonary artery; II. Small contracted kidneys; III. Cancer of bones of skull. **Specimens presented**, Medico-Chirurgical Society of Montreal, May 27, 1881.) Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 744-745.

I. *Fibroid degeneration of the heart (2 specimens); II. *Cancer of cæcum. (**Specimens presented**, Medico-Chirurgical Society of Montreal. June 10, 1881.) Rept. *Canada M. & S. J.*, Montreal, 1881-82, x, 15-16.

Renal cirrhosis, with special reference to its latency and to sudden fatal manifestations occurring in its course. (Delivered in McGill Summer Session Course, May 28, 1881.) *Canada Lancet*, Toronto, 1880-81, xiii, 353-359. *Also*, Toronto, Dudley & Barnes, 13 p. 8 vo. (Specimens illustrating this communication were presented, May 27, 1881, and March 16, 1883. Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 744; 1882-83, xi, 680.) [*In his:* C. r., 1870-82, i, 42.]

*Infectious (so-called ulcerative) endocarditis. *Arch. Med.*, N. Y., 1881, v, 44-68, (1 plate, 7 figs.). *Review, Canad. J. M. Sc.*, Toronto, 1881, vi, 95. [*In his:* C. r., 1870-82, i, No. 36.]

Reports of seven cases from his pathological service at the Montreal General Hospital.

Ulcerative endocarditis. (Paper and microscopic specimens presented, Jan. 26, 1881.) Rept. *Tr. N. York Path. Soc.*, 1881, iv, 29-33.

***On some points in the etiology and pathology of ulcerative endocarditis.** (Presented at the Seventh International Congress of Medicine, London, August 2-9, 1881.) *Tr. Internat. M. Congr.*, London, 1881, i, 341-346. *Also*, J. W. Kolckmann, 8 p. 8°. [*In his:* C. r., 1882-92, ii, No. 44.]

Based on an analysis of sixty-seven cases, and twelve personal observa-

*Specimen in the Medical Museum of McGill University.

tions, of which seven of the latter and twenty-four of those analyzed were of cases developing in the course of a pneumonia. Of this communication Dr. R. P. Howard says in his report on the congress, "The very frequent connection of this affection with lobar pneumonia he was the first to indicate and emphasize." (*Canada M. & S. J.*, Montreal, 1881-82, x, 150.)

***On some of the effects of the chronic impaction of gallstones in the bile-passages, and on the "fièvre intermittente hépatique" of Charcot.** (Delivered in the demonstration course on morbid anatomy, Jan. 15, 1881.) *Med. Times & Gaz.*, Lond., 1881, ii, 111-114. (Describes twelve cases, of which four were presented, Medico-Chirurgical Society of Montreal, February 6, 1880, and November 12, 1880, January 21, and October 28, 1881. Rept. *Canada M. & S. J.*, Montreal, 1879-80, viii, 367; 1880-81, ix, 352; ix, 484; 1881-82, x, 299-300.) [*In his:* C. r., 1870-82, i, No. 41.]

***Notes on intestinal diverticula.** Case of Dr. Trenholme's. *Ann. Anat. & Surg.*, Brooklyn, N. Y., 1881, iv, 202-207. **(Specimen presented,** Medico-Chirurgical Society of Montreal, September 30, 1881. Rept. *Canada M. & S. J.*, Montreal, 1882, x, 236.) [*In his:* C. r., 1870-82, i, No. 43.]

In this remarkable case, the jejunum presented "53 diverticula on the mesenteric border—all of hemispherical shape and attached by broad bases. They ranged in size from a cherry to a large apple." Death occurred from hæmorrhage following perforation. The clinical history was given by Dr. Trenholme under the title, "A case of melæna" at the succeeding meeting of the Medico-Chirurgical Society of Montreal to that at which the specimen was presented by Dr. Osler (l. c. 238).

1882

***Case of obliteration of the portal vein (pylephlebitis adhesiva.)** (Presented, Medico-Chirurgical Society of Montreal, Sept. 30, 1881.) *J. Anat. & Physiol.*, Lond., 1881-82, xvi, 208-216. [*In his:* C. r., 1882-92, ii, No. 46.]

I. Pneumonia, diphtheritic gastritis; II. *Mitral and tricuspid stenosis. **(Specimens presented,** Medico-Chirurgical Society of Montreal, Jan. 6, 1882.) Report with discussion. *Canad. J. M. Sc.*, Toronto, 1882, vii, 84. *Also, Med. News*, Phila., 1882, xl, 80-81.

On the brains of criminals. With a description of the brains of two murderers. *Canada M. & S. J.*, Montreal, 1881-82, x, 385-398, (with 2 plates, 4 figs.). (Presented, Medico-Chirurgical Society of Montreal, Jan. 6, 1882. Rept. *Ibid*, 422.) [*In his:* C. r., 1882-92, ii, No. 45.]

Based upon the anatomical configuration of the convolutions of the brains of two murderers (Hayvern and Moreau) convicted and hanged at Rimouski and Montreal, in 1881.

The brains of criminals. (Open letter dated June 12, 1882.) *Lancet*, Lond., 1882, ii, 38.

(*Two cases of cancer of the stomach, I., under care of Dr. George Ross, II., under care of Dr. Molson. Reported by Dr. J. A. MacDonald.) **Autopsies,** by Dr. Osler. *Canada M. & S. J.*, Montreal, 1881-82, x, 406-408.

(*A case of ammonia poisoning, by Dr. A. A. Browne. **Autopsy,** by Dr. Osler.) **Specimens presented,** Medico-Chirurgical Society of Montreal,

*Specimen in the Medical Museum of McGill University.

Feb. 17, 1882. Rept. *Canada M. & S. J.*, Montreal, 1881-82, x, 450. Rept. *Ibid.*, 502-503.

I. *Atheromatous plate and ulcers on arch of aorta; II. *Atheromatous abscess and aneurism of the right iliac artery, general atheroma. (**Specimens presented**, Medico-Chirurgical Society of Montreal, Feb. 17, 1882.) Rept. *Med. News*, Phila., 1882, xl, 249-251. *Also, Canada M. & S. J.*, Montreal, 1881-82, x, 498-499.

Specimen II. is figured in the Cartwright Lectures as illustrating, "The relation of the blood corpuscles to coagulation and thrombosis," *Med. News*, Phila., 1886, xlvii, 424. (See under Rubric I.)

*(Aneurism of aorta; perforation into œsophagus, by Dr. Wood.) (**Autopsy**, by Dr. Osler.) Presented, Medico-Chirurgical Society of Montreal, Feb. 17, 1882. Rept. *Canada M. & S. J.*, Montreal, 1881-82, x, 501-502. *Also, Med. News*, Phila., 1882, xi, 251.

(Case of cerebro-spinal meningitis, by Dr. G. W. Major.) **Autopsy, by** Dr. Osler. *Canada M. & S. J.*, Montreal, 1881-82, x, 594.

(*Case of sarcoma of the jejunum. **Under care of** Dr. Molson. **Reported** by Dr. J. A. Macdonald.) **Autopsy, by** Dr. Osler. *Canada M. & S. J.*, Montreal, 1881-82, x, 602-603.

Cases of tubercular meningitis. **Under care of** Dr. Osler. (Reported by Dr. J. A. MacDonald.) *Canada M. & S. J.*, Montreal, 1881-82, x, 603-606.

Cancer of ascending colon—extensive secondary growths in liver. **Under care of** Dr. Osler. Reported by Dr. Duncan. *Canada M. & S. J.*, Montreal, 1882-83, xi, 28-29.

Echinococcus disease in the lung. (By Dr. Black. Canada Medical Association, Toronto, Sept. 6, 1882.) **Discussion** by Dr. Osler. Rept. *Canada Lancet*, Toronto, 1882-83, xv, 49.

Bacillus of tuberculosis, bacillus of anthrax. (**Slides exhibited**, Canada Medical Association, September 8, 1882.) Rept. *Med. News*, Phila., 1882, xli, 357.

(Supplement to the descriptive catalogue of the pathological museum of the Pennsylvania Hospital, by Morris Longstreth. Philadelphia: Collins, Printer, 1882, 219 pp.) (Initialled **book review.**) *Am. J. M. Sc.*, Phila., 1882, n. s., lxxxiv, 229-230.

"We had occasion lately to go through some ten pathological museums of the different schools and hospitals in this country, and were in a position, on arriving at the Pennsylvania Hospital, to appreciate fully, the advantage of a good catalogue."

Uræmic delirium and coma at a very early stage of interstitial nephritis. *Arch. Med.*, N. Y., 1882, vii, 213-215. (Specimen presented, Medico-Chirurgical Society of Montreal, May 13, 1881. Microscopic slide, May 27, 1881.) Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 671-673; 744. [*In his:* C. r., 1882-92, ii, No. 51.]

I. *Obliterated superior vena cava (reported also by Dr. Wilkins); II. Fatty diarrhœa; III. Eighteen ounces of bile obtained by aspiration; IV. Pneumonia terminating in abscess of lung. (**Specimens presented**, Medico-Chirurgical Society of Montreal, Oct. 20, 1882.) Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 298-299. *Also, Med. News*, Phila., 1882, xli, 580.

(*Cancer of œsophagus [perforation of the lung], by Dr. George Ross. Presented, Medico-Chirurgical Society of Montreal, Oct. 20, 1882.)

*Specimen in the Medical Museum of McGill University.

Autopsy, by Dr. Osler. Rept. *Med. News*, Phila., 1882, xli, 580-581. *Also, Canada M. & S. J.*, Montreal, 1882-83, xi, 300.

(Pathology of papillomatous growths of larynx, by Dr. Major.) **Discussion** by Dr. Osler. Rept. *Canada M & S. J.*, Montreal, 1882-83, xi, 303.

1883

I. Cerebral aneurism and hæmorrhage; II. *Erosion of internal carotid in cavernous sinus six weeks after a blow on the head; III. Cancer of stomach with enormous secondary cancer of liver; IV. Diphtheria with extension into primary bronchi. (**Specimens presented**, Medico-Chirurgical Society of Montreal, Nov. 17, 1882.) Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 355-358.

(Obliteration of superior vena cava, by Dr. Wilkins. Presented Medico-Chirurgical Society of Montreal, Nov. 17, 1882.) **Discussion** by Dr. Osler. Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 360-361.

*Double aneurism of thoracic aorta. (**Specimen presented**, Medico-Chirurgical Society of Montreal, Dec. 1, 1882.) Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 365-366.

I. *Lungs from a case of tuberculosis of pleura and lungs; II. Ulceration in typhoid fever; III. Fibroid disease extending to the lung from the pleura—cirrhosis of lungs and kidneys. (**Specimens presented**, Medico-Chirurgical Society of Montreal, Dec. 15, 1882.) Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 414-416.

(*Aneurism of anterior communicating artery, by Dr. Ross. Presented Medico-Chirurgical Society of Montreal, Feb. 16, 1883.) **Autopsy**, by Dr. Osler. *Canada M. & S. J.*, Montreal, 1882-83, xi, 548-549 (1 plate). Rept. *Med. News*, Phila., 1883, xlii, 252. *Also, Canada M. Rec.*, Montreal, xi, 133-134.

(Ulcerative endocarditis, simulating typhoid, by Dr. George Ross.) **Specimen presented**, Medico-Chirurgical Society of Montreal, Feb. 16, 1883. Rept. *Med. News*, Phila., 1883, xlii, 252. *Also, Canada M. & S. J.*, Montreal, 1882-83, xi, 555-556.

Dr. Osler exhibited the characteristic micrococci of the vegetations, stained with aniline blue.

I. Calcification of the tooth-pulp; II. Double hernia. (**Specimens presented**, Medico-Chirurgical Society of Montreal, February 16, 1883.) Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 556-557. *Also, Med News*, Phila., 1883, xlii, 252.

Report on the brains of Richards and O'Rourke. *Canada M. & S. J.*, Montreal, 1882-83, xi, 461-466. (Presented, Medico-Chirurgical Society of Montreal, February 16, 1883. Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 562. *Also, Med. News*, Phila., 1883, xlii, 254.) [*In his:* C. r., 1882-92, ii, No. 59.]

A study of the brains of two criminals also executed for murder at Montreal.

I. Chronic Bright's disease; II. *Membranous cast of windpipe and bronchi; III. *Aneurism of pulmonary artery in small cavity; IV. Acute tuberculosis of lung and spleen. (**Specimens presented**, Medico-Chirurgical Society of Montreal, March 16, 1883.) Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 620.

*Specimen in the Medical Museum of McGill University.

(Chyluria, not parasitic, by Dr. McConnell. (Presented Medico-Chirurgical Society of Montreal, April 27, 1883.) **Discussion** by Dr. Osler. Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 683.

I. *Aneurism of aorta, rupture into pericardium; II. Puerperal convulsions, ventricular hæmorrhage; III. Fibroid heart and atrophic kidneys. (**Specimens presented**, Medico-Chirurgical Society of Montreal, April 13, 1883.) Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 679-680.

I. *Scirrhous disease of pancreas and colloid lung; II. Kidneys from a man found comatose; III. Thrombosis and embolism of superior mesenteric artery. (**Specimens presented**, Medico-Chirurgical Society of Montreal, April 27, 1883.) Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 687. *Also, Med. News.*, Phila., 1883, xlii, 694.

Spleen and bone-marrow from a case of pernicious anæmia. (**Specimen presented**, Medico-Chirurgical Society of Montreal, May 11, 1883.) Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 741.

*Aneurism of anterior cerebral artery. (**Specimen presented**, Medico-Chirurgical Society of Montreal, May 25, 1883.) Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 34-35. *Also, Canada M. Rec.*, Montreal, 1882-83, xi, 241.

I. Amyloid liver in a case dying of phthisis; II. Lymphosarcomatous growth of bronchial glands. By Dr. Wilkins. (**Specimens presented**, Medico-Chirurgical Society of Montreal, June 14, 1883.) Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 103.

(Invaginated and gangrenous bowel, by Dr. Sheard. Presented Canada Medical Association, Kingston, Sept. 5, 1883.) **Discussion** by Dr. Osler. Rept. *Canada Lancet*, Toronto, 1883-84, xvi, 50.

*Aneurism of abdominal aorta and superior mesenteric artery. (**Specimen presented**, Medico-Chirurgical Society of Montreal, Oct. 26, 1883.) Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 294.

I. Cancer of liver with much enlarged glands; II. *Fibroid disease of stomach; III. Laceration of brain from hæmorrhage; IV. Ovarian cysts in an infant. (**Specimens presented**, Medico-Chirurgical Society of Montreal, November 9, 1883.) Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 300-302. *Also, Canada M. Rec.*, Montreal, 1883-84, xii, 52.

Secondary myeloid disease of pleura and lung. *Illus. M. & S.*, N. Y., 1883, ii, 117-118, (with colored plate and line cut.) (**Specimen presented**, Medico-Chirurgical Society of Montreal, November, 1880. Rept. with discussion, *Canada M. & S. J.*, Montreal, 1880-81, ix, 351-352.)

1884

*Fibro-glioma of upper end of ascending frontal gyrus; Jacksonian epilepsy of fourteen years' standing; the leg-centre. **Specimen presented**, Medico-Chirurgical Society of Montreal, Dec. 14, 1883. Rept. *Canada M. Rec.*, Montreal, 1883-84, xii, 82 . *Also, Med. News*, Phila., 1884, xliv, 82-83.

This specimen is from the case which formed the basis of his article on Jacksonian epilepsy (see below under Rubric III.)

(*Heart showing ulcerative endocarditis, by Dr. Wilkins.) **Specimen presented**, Medico-Chirurgical Society of Montreal, Nov. 23, 1883. Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 349.

*Specimen in the Medical Museum of McGill University.

(Tertiary syphilis—cerebral, laryngeal, and rectal, by Dr. George Ross.) **Specimens presented,** Medico-Chirurgical Society of Montreal, Dec. 14, 1883. Rept. *Canada M. Rec.*, Montreal, 1883-84, xii, 81-82.

I. *Syphilitic caries of inner table of skull—great thickening of calvarium —compression and deformity of brains; II. *Skull showing destruction of entire right parietal and frontal bones. (**Specimens presented,** Medico-Chirurgical Society of Montreal, December 14, 1883.) Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 351-352. *Also, Med. News*, Phila., 1884, xliv, 25: *Canada M. Rec.*, Montreal, 1883-84, xii, 78-82.

Cases of dysentery—under the care of Dr. Osler. **I. *Sloughs in the colon and rectum of unusual extent—death; II. *Abscess of liver pointing externally—death.** *Canada M. & S. J.*, Montreal, 1883-84, xii, 330-333.

I. (*Small aneurism of aorta, rupture into left bronchus, by Dr. George Ross); II. *Aortic, mitral and tricuspid valve disease. **Specimens presented,** Medico-Chirurgical Society of Montreal, January 11, 1884. Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 426. *Also, Canada M. Rec.*, Montreal, 1883-84, xii, 98.

(*Non-valvular dilatation and hypertrophy of the heart, by Dr. Ross.) **Specimen presented,** Medico-Chirurgical Society of Montreal, Jan. 11, 1884. Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 427-428.

In the discussion following Dr. Osler stated that this was the fifth or sixth case of so-called "idiopathic" hypertrophy and dilatation of the heart, he had dissected, and referred in this connection to Da Costa's work on the so-called "irritable heart" of young recruits.

I. *Organized thrombus of left iliac vein; II. *Dermoid cyst of ovary containing sebum, hair and teeth; III. Rapidly formed scirrhus of liver. (**Specimens presented,** Medico-Chirurgical Society of Montreal, February 15, 1884.) Rept. *Canada M. & S. J.*, Montreal, 1883-84, xii, 546-547. *Also, Canada M. Rec.*, Montreal, 1883-84, xii, 155.

(Lateral sclerosis, by Dr. R. MacDonnell. Canadian Medical Association, Montreal, Aug. 26, 1884.) **Discussion,** by Dr. Osler. Rept. *Canada Lancet*, Toronto, 1884-85, xvii, 47.

(Case of congenital hypertrophy with lipoma of the foot, by Dr. Blackader. Canadian Medical Association, Montreal, Aug. 25, 1884.) **Discussion** by Dr. Osler. Rept. *Med. News*, Phila., 1884, xlv, 329. *Also, Brit. M. J.*, Lond., 1884, ii, 736.

Dr. Osler referred in the discussion to his own case of progressive enlargement of the right upper limb. (*J. Anat. & Physiol.*, Lond., 1879-80, xiv.)

Autopsies performed at the Montreal General Hospital, 1877 to 1884, (unpublished).

During the seven years of Osler's service as Pathologist to the Montreal General Hospital he performed 786 autopsies. Of these the first 325 are listed in the Pathological Reports Nos. I. and II. of the Hospital published by himself in 1877 and 1880, and the remainder are cited in the Pathological Report No. III. of the Hospital, published by the late John McCrae in 1895. Three of the seven bound volumes which contained his autograph autopsy notes are extant to-day in Montreal. *M. E. A.*

*Specimen in the Medical Museum of McGill University.

THE

GULSTONIAN LECTURES,

ON

MALIGNANT ENDOCARDITIS.

DELIVERED AT THE

Royal College of Physicians of London, March, 1885.

BY

WILLIAM OSLER, M.D.,

Professor of Clinical Medicine at the University of Pennsylvania, Philadelphia.

[Reprinted from the BRITISH MEDICAL JOURNAL, March 7, 1885.]

LONDON:

THE BRITISH MEDICAL ASSOCIATION, 161A, STRAND, W.C

1885.

FIG. 4.—Title-page of Osler's first important series of public addresses, based on an extensive pathological research of permanent value. (Illustrating Rubric II. 2).

PHILADELPHIA PERIOD

(1884-1889)

1884

(The pathology of broncho-pneumonia, by Dr. Francis Delafield. Pathological Society of Philadelphia, Oct. 23, 1884.) **Discussion** by Dr. Osler. Rept. *Med. News*, Phila., 1884, xlv, 553.

Koch's latest researches in cholera. (Unsigned editorial.) *Med. News*, Phila., 1884, xlv, 601.

Apparently Osler's first editorial in the *Medical News*. Some 150 of these unsigned editorials have been identified for Miss Blogg's bibliography by Dr. Thomas McCrae from original MSS. in possession of Lea and Febiger (Philadelphia) and are listed in this Bibliography under the Rubrics to which they pertain.

Yellow-fever inoculations. (Unsigned editorial.) *Med. News*, Phila., 1884, xlv, 631.

1885

Pneumonia coccus in the air. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 129-130.

On contamination of gelatine plates by Friedländer's diplococcus.

(Pyelonephritis and chronic parenchymatous nephritis in the same patient complicating cystitis, by Dr. J. Tyson, Pathological Society of Philadelphia, Jan. 22, 1885.) **Discussion** by Dr. Osler. Rept. *Tr. Path. Soc. Phila.*, (1883-85), 1886, xii, 209. *Also, Maryland M. J.*, 1884-85, xii, 324.

The Gulstonian lectures on malignant endocarditis. (Delivered at the Royal College of Physicians of London, during March, 1885.) *Brit. M. J.*, Lond., 1885, i, 467-470; 522-526; 577-579 (2 temperature charts). *Also, Lancet*, Lond., 1885, i, 415-418; 459-464; 505-502: *Med. News*, Phila., 1885, xlvi, 309-313; 337-343; 365-369. *Abstr.: Canada M. & S. J.*, Montreal, 1885, xiii, 510. *Rev.: Med. Times*, Phila., 1885, i, 285. *Edit.: Ibid.*, 422-423. [*In his:* C. r., 1882-92, ii, No. 63.]

Based entirely on autopsies performed in Montreal.

Aneurism of arch of aorta, with rupture into the trachea in two places and perforation of the œsophagus. (**Specimen presented**, Pathological Society of Philadelphia, April 9, 1885.) Rept. *Tr. Path. Soc. Phila.*, (1883-85), 1886, xii, 110-113. *Also, Boston M. & S. J.*, 1885, cxii, 480-481.

Osler's first contribution to the Philadelphia Pathological Society. The pathological side of Osler's career was completed chiefly at "Blockley" ((Philadelphia General Hospital), where in less than five years he performed 162 autopsies, in ninety-four of which he was attending physician as well. *E. B. K.*

Tubercle bacilli in the urine. (**Specimen presented**, Pathological Society of Philadelphia, April 23, 1885.) Rept. *Tr. Path. Soc. Phila.*, (1883-85), 1886, xii, 215.

(Primary tuberculosis of the kidneys, by Dr. M. H. Fussell. Specimen presented to Pathological Society of Philadelphia, April 23, 1885.) **Discussion** by Dr. Osler. Rept. *Tr. Path. Soc. Phila.*, (1883-85), 1886, xii, 215.

***Notes on the morbid anatomy of pneumonia.** (Presented Philadelphia Pathological Society, April 23, 1885.) *Canada M. & S. J.*, Montreal,

*Specimen in the Medical Museum of McGill University.

1884-85, xiii, 596-605. *Also, Maryland M. J.*, Balt., 1885, xiii, 68-69: *Tr. Path. Soc. Phila.*, (1883-85), 1886, xii, 188-196. *Abstr.* (and discussion): *Med. News*, Phila., 1885, xlvi, 565-566. *Also, Med. Times*, Phila., 1885, xvi, 34-35. [*In his:* C. r., 1882-92, ii, No. 64.]

"This with other articles which will follow from time to time will constitute my third and last pathological report from the Montreal General Hospital." Several of the specimens here referred to are in the museum of McGill University.

(Encephaloid disease of the stomach, by Dr. J. K. Mitchell. Specimen presented, Pathological Society of Philadelphia, May 14, 1885.) **Discussion** by Dr. Osler. Rept. *Tr. Path. Soc. Phila.*, (1883-85), 1886, xii, 65-66.

Notes on the morbid anatomy of typhoid fever. *Canada M. & S. J.*, Montreal, 1885-86, xiv, 7-26. [*In his:* C. r., 1882-92, ii, No. 65.]

Based on experience as pathologist to the Montreal General Hospital.

Guy's Hospital Reports, edited by Frederick Taylor and N. Davies-Colley, vol. xlii, London: J. & A. Churchill, 1884. (Initialled **book review.**) *Am. J. M. Sc.*, Phila., 1885, n. s., xc, 224-232.

Contains a note on a descriptive list by Dr. Goodhart of the *specimens added to the Museum during the years 1882-1884*, "which shows the care with which typical and illustrative preparations are preserved to enrich the splendid collection—one of the chief glories of the Guy's School."

(Aneurism of the aorta, by Dr. Grant. Canadian Medical Association, Sept. 2, 1885.) **Discussion** by Dr. Osler. Rept. *Med. News*, Phila., 1885, xlvii, 379-380.

Small aneurisms of arch of aorta; compression and perforation of trachea; death from suffocation. (**Specimen presented**, Pathological Society of Philadelphia, Oct. 8, 1885.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 74-75.

(Ganglion of wrist-joint, by Dr. J. B. Roberts. Pathological Society of Philadelphia, Nov. 12, 1885.) **Discussion** by Dr. Osler. Rept. *Med. Times*, Phila., 1885, xvi, 213.

(Diabetes mellitus, by Dr. J. H. Musser. Pathological Society of Philadelphia, Nov. 12, 1885.) **Discussion** by Dr. Osler. Rept. *Med. Times*, Phila., 1885, xvi, 212.

(The most prominent anatomical lesions of chronic alcoholism, by H. F. Formad. Paper and specimens presented Pathological Society of Philadelphia, Nov. 12, 1885.) Discussion by Dr. Osler. Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 235-236. *Also, Maryland M. J.*, 1885-86, xiv, 106-109: *Med. Times, Phila.*, 1885, xvi, 214.

Ferrân on the morphology of the comma-bacillus. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvi, 717.

Tubercle bacilli and giant cells. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 406.

On the investigations of Baumgarten and Weigert.

An atlas of clinical microscopy, by Alexander Peyer, translated and edited by Alfred C. Girard. New York: D. Appleton & Co., 1885. (Unsigned **book review.**) *Med. News*, Phila., 1885, xlvii, 662.

Œdema of the lungs. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 491.

Reviews theory of increased pulmonary pressure secondary to paralysis of left ventricle.

Actinomycosis. (Unsigned editorial.) *Med. News,* Phila., 1885, xlvii, 517-518.

Review of the subject from the date of Bollinger's and Israel's papers (1877).

The bacillus of syphilis. (Unsigned editorial.) *Med. News,* Phila., 1885, xlvii, 710-711.

Describes the Lustgarten bacillus, afterwards shown by Klemperer and Matterstock to be identical, or similar to, the smegma bacillus.

A manual of microscopical technology for use in investigations of medicine and pathological anatomy, by Carl Friedländer, translated from the second edition by Stephen Yates Howell. New York: G. P. Putman's Sons, 1885. (Unsigned **book review.**) *Med. News,* Phila., 1885, xlviii, 16.

"An intimate acquaintance with its first and second editions enables us to speak very positively of the merits of this manual as a reliable, practical guide."

Acute endocarditis. (Unsigned editorial.) *Med. News,* Phila., 1885, xlvii, 459.

On the important communication made by Orth at the Congress of German Naturalists and Physicians, demonstrating micro-organisms in all cases of ulcerative endocarditis, while absent in the simple verrucose form.

1886

(Amyloid disease following chronic dysentery, by Dr. T. S. K. Morton, at Pathological Society of Philadelphia, Jan. 14, 1886.) **Discussion** by Dr. Osler. Rept. *Tr. Path. Soc. Phila.,* (1885-87), 1887, xiii, 21-24. *Also, Maryland M. J.,* 1885-86, xiv, 269.

A case of **retro-peritoneal spindle-celled sarcoma with extensive thrombotic and hæmorrhagic changes.** (**Specimen presented,** Pathological Society of Philadelphia, Jan. 14, 1886.) *Tr. Path. Soc. Phila.,* (1885-87), 1887, xiii, 211-216. *Also,* ***New York M. J.,*** 1886, xliii, 136: ***Maryland M. J.,*** Balt., 1885-86, xiv, 269-271: ***Semi-Month. J. Proc. Path. Soc. Phila.,*** Wilmington, Del., 1886, i, 3-4: ***J. Am. M. Assoc.,*** 1886, vi, 107-108: ***Med. News,*** Phila., 1886, xlviii, 263-264. [***In his:*** C. r., 1882-92, **ii, No. 69.**]

This article was also published under the title: Spindle-celled sarcoma of the retro-peritoneum with extensive thrombotic degeneration.

The structure of certain gliomata. (Address read before the Philadelphia Neurological Society, Jan. 26, 1886.) Rept. *Med. Times,* Phila., 1885-86, xvi, 394-395. ***Also, Med. News,*** Phila., 1886, xlviii, 220-221.

I. Hæmorrhagic pancreatitis, with swelling of the semilunar ganglia and Pacinian corpuscles. (With W. E. Hughes.) II. Pyopneumo-thorax subphrenicus. (**Specimens presented,** Pathological Society of Philadelphia, Jan. 28, 1886.) Rept. *Tr. Path. Soc. Phila.,* (1885-87), 1887, xiii, 24-25, 113-115. *Also, Semi-Month. J. Proc. Path. Soc.,* Phila., Wilmington, 1886, i, 5, 7.

Aneurism of the larger cerebral arteries.** (Presented, Pathological Society of Philadelphia, May 13, 1886.) *Tr. Path. Soc. Phila.,* (1885-87), 1887, xiii, 87-93. *Also, Canada M. & S. J.,* Montreal, 1885-86, xiv, 660-666. [In his:*** C. r., 1882-92, ii, No. 75.]

*Specimen in the Medical Museum of McGill University.

THE

BICUSPID CONDITION OF THE AORTIC VALVES.

BY

WILLIAM OSLER, M.D., F.R.C.P. Lond.,
PROFESSOR OF CLINICAL MEDICINE IN THE UNIVERSITY OF PENNSYLVANIA.

REPRINTED FROM THE
TRANSACTIONS OF THE ASSOCIATION OF AMERICAN PHYSICIANS,
JUNE 18, 1886.

PHILADELPHIA
WM. J. DORNAN, PRINTER.
1886.

Fig. 5.—Title-page of one of Osler's most important contributions in the field of morbid anatomy. (Rubric II. 1).

Based on a series of cases of which ten abstracts are given, mainly from his service as pathologist at the Montreal General Hospital. (*Canada M. & S. J.*, Montreal, 1876-77, v, 57-58; 1882-83, xi, 548-549).

Specimen from a case of tuberculosis of both lungs, with implication of the suprarenal bodies and tuberculous ulceration of the colon—symptoms of Addison's disease. (With J. C. Wilson. **Specimen presented**, Pathological Society of Philadelphia, May 27, 1886.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 248-251.

(Spasm of the glottis in rickets, by Dr. James T. Whitaker. Presented, Association of American Physicians, Washington, D. C., June 17, 1886.) **Discussion** by Dr. Osler. Rept. *Trans. Assn. Am. Phys.*, 1886, i, 77.

This was the first meeting of the Association.

*The bicuspid condition of the aortic valves. (Presented, Association of American Physicians, Washington, D. C., June 17, 1886.) *Tr. Assoc. Am. Physicians*, Phila., 1886, i, 185-192. Rept. *J. Am. M. Assoc.*, Chicago, 1886, vii, 49-50. [*In his:* C. r., 1882-92, ii, No. 72.]

(Certain elements found in the blood in cases of malarial fever, by Dr. W. T. Councilman. Association of American Physicians, Washington, D. C., June 18, 1886.) **Discussion** by Dr. Osler. Rept. *Tr. Assoc. Am. Physicians*, Phila., 1886, i, 96.

Atrophy of the stomach with the clinical features of progressive pernicious anæmia. (With Frederick P. Henry.) *Am. J. M. Sc.*, Phila., 1886, n. s., xci, 498-511 (4 fig.) [*In his:* C. r., 1882-92, ii, No. 70.]

Acute phthisis. (**Card specimen**, presented Pathological Society of Philadelphia, June 24, 1886.) Rept. *Tr. Path. Soc. Phila.*, 1887, xiii, 306.

(Ovariotomy, by Dr. Clara Marshall. Philadelphia Clinical Society, Oct. 22, 1886.) **Autopsy** by Dr. Osler. Rept. *Maryland M. J.*, 1886-87, xvi, 142.

Embolism of right middle cerebral artery; chronic nephritis. (**Specimen presented**, Philadelphia Neurological Society, Oct. 25, 1886.) Rept. *Med. News*, Phila., 1886, xlix, 554.

I. Anomalous anterior papillary muscle: II. Aneurism of thoracic aorta; perforation into left pleura; III. †Two cases of four leaflets to the pulmonary valve. (**Specimens presented.** Pathological Society of Philadelphia, Nov. 11, 1886.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 95-96; 302-303.

I. Three cases of abscess of liver; II. Two cases of cancer of the stomach; III. Bicuspid pulmonary valve; IV. Cancer of the colon; V. Intestine passed by the anus. (**Specimens presented**, Pathological Society of Philadelphia, Dec. 9, 1886.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 50-54; 303, 304.

Addendum to paper on cerebral aneurisms. *Canada M. & S. J.*, Montreal, 1885-86, xiv, 710-711.

Cites two additional cases presented at the Medico-Chirurgical Society of Montreal, on Nov. 17, 1882, and May 25, 1883.

Experimental endocarditis. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 183.

Review of recent work of Orth and Ribbert on the production of acute endocarditis by injection of micro-organisms.

*Specimens in the Medical Museum of McGill University.

†One of these specimens is still in the Pathological Museum of the Philadelphia General Hospital, and is figured here facing page 235.

The malarial germ of Laveran. (Unsigned editorial.) *Med. News*, Phila., 1886, xlix, 265-266.

Discusses confirmation of Laveran's findings by Marchiafava and Celli, Tommasi-Crudelli, Councilman, Sternberg and Osler himself.

Filaria sanguinis hominis. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 438.

On Guitéras's discovery that this hæmatozoön is native in the United States.

1887

An address on the hæmatozoa of malaria. (Delivered Pathological Society of Philadelphia, Oct. 28, 1886.) *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 255-276. *Also, Brit. M. J.*, Lond., 1887, i, 556-562 (15 illus.) [*In his:* C. r., 1882-92, ii, No. 76.]

The annual address of the "Conversational Meeting" of the Philadelphia Society; based on the study of fifty-two cases, fully illustrated. A few months previously, at the meeting of the Association of American Physicians, he had been very skeptical of the nature of these organisms, but had apparently set to work to solve the problem with this brilliant result.

Old hemiplegia. (**Card specimen** presented, Pathological Society of Philadelphia, Jan. 13, 1887.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 308.

Sarcoma of the left frontal lobe. (**Specimen presented,** Pathological Society of Philadelphia, Jan. 27, 1887.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 186.

Large plebolith of long saphenous vein. (**Specimen presented,** Pathological Society of Philadelphia, Feb. 10, 1887.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 98.

I. Hernia of cæcum and appendix; perforation of latter; old perityphlitic abscess; recent larger one; general peritonitis; II. Cirrhosis of liver; fatal hæmorrhage from œsophageal varix. (**Specimens presented,** Pathological Society of Philadelphia, Feb. 24, 1887.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 64-66; 276-277.

(Tumour of the optic thalamus, by Dr. C. K. Mills, Pathological Society of Philadelphia, Feb. 24, 1887.) **Autopsy** by Dr. Osler. Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 191-193.

In the discussion, Osler refers to a paper presented by him to this Society Jan. 23, 1879, describing a similar case of tumour of brain in front of the optic chiasm.

Duodenal ulcer, clinical and anatomical considerations based on nine cases. *Canada M. & S. J.*, Montreal, 1886-87, xv, 449-461. [*In his:* C. r., 1882-92, ii, No. 74.]

Rupture of the posterior papillary muscle of the left ventricle of the heart. (**Specimen presented,** Pathological Society of Philadelphia, March 10, 1887.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 98-100.

The case was "unique in my experience" as affording no evidence of vegetations. The coronaries were atheromatous.

(Diagnostic value of tubercle bacilli in sputa, by Dr. H. M. Fussell. Philadelphia County Medical Society, April 27, 1887.) **Discussion,** by Dr. Osler. Rept. *Med. News*, Phila., 1887, l, 556.

(Large tumour of the right frontal lobe without the presence of active symptoms, by Dr. G. E. de Schweinitz, May 26, 1887.) Dr. Osler assisted at autopsy. Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 202.

Notes on hæmorrhagic infarction. (Presented, Association American Physicians, Philadelphia, June 2, 1887.) *Tr. Assoc. Am. Physicians*, Phila., 1887, ii, 133-141. *Also, Boston M. & S. J.*, 1887, cxvii, 325-328. [*In his:* C. r., 1882-92, ii, No. 79.]

Osler refers to his article, "Pylephlebitis adhesiva" (*J. Anat. & Physiol.*, Lond., 1881-82, xvi, 208-216). The paper was discussed by Dr. Reginald H. Fitz, of Boston.

(Atrophy of the gastric tubules—its relation to pernicious anæmia, by Dr. F. P. Kinnicutt. Association of American Physicians, Washington, D. C., June 3, 1887.) **Discussion** by Dr. Osler. Rept. *Tr. Ass. Am. Physicians*, Phila., 1887, ii, 197-198. *Also, Med. Rec.*, N. Y., 1887, xxxi, 694.

Embolism of left anterior cerebral artery; softening of left frontal lobe. (**Specimen presented**, Pathological Society of Philadelphia, June 9, 1887.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 202-203.

(The anthrax epidemic at Guelph, by Dr. W. H. B. Aikins. Canadian Medical Association, Hamilton, Ont., Aug. 31, 1887.) **Blood examination**, by Dr. Osler. *Canad. Pract.*, 1887, xii, 279.

***The cardiac relations of chorea.** (Read by title at annual meeting Canadian Medical Association, Hamilton, Ontario, September 1, 1887.) *Am. J. M. Sc.*, Phila., 1887, n. s., xciv, 371-386. *Abstr.: Braithwaite's Retrospect of Medicine*, 1888, xcvii, 20-21. [*In his:* C. r., 1882-92, ii, No. 78.]

Based on three cases from his autopsy service of the Montreal General Hospital, and upon a statistical study of the condition of the heart some years after the attack in 110 cases in the practice of the Philadelphia Infirmary for Nervous Disease. Comments upon "extraordinary frequency with which mitral valvulitis is met with in fatal cases. There is *no known disease in which endocarditis is so constantly found, as in chorea*..... In a considerable proportion of cases of chorea —much larger than has previously been supposed—the complicating endocarditis lays the foundation of organic heart disease."

Thrombosis of portal vein. (**Specimen presented**, Pathological Society of Philadelphia, Sept. 22, 1887.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 104-105. *Also, M. & S. Reporter*, Phila., 1887, lvii, 576-577: *J. Am. M. Ass.*, Chicago, 1887, ix, 598-599.

(A case of unilateral convulsions and another of hemiplegia occurring in uræmia, by F. X. Dercum. Philadelphia Neurological Society, Oct. 24, 1887.) **Discussion** by Dr. Osler. Rept. *J. Nerv. & Ment. Dis.*, N. Y., 1887, xiv, 769-770.

(Some further investigations on the malarial germ of Laveran, by Dr. W. T. Councilman. Pathological Society of Philadelphia, Oct. 27, 1887.) **Discussion** by Dr. Osler. Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 268-269.

I. *Disease of the coronary artery; fibroid heart. II. Mitral stenosis; three attacks of chorea; II. *Aneurism of a branch of the pulmonary artery in a phthisical cavity; IV. Aneurism of the left middle cerebral

*Specimen in the Medical Museum of McGill University.

artery; V. Combined mitral and aortic disease; VI. Large fibrocystic goitre; hæmorrhage; sudden death. (**Specimens presented**, Pathological Society of Philadelphia, Nov. 10, 1887.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 106-108; 114-119.

I. Chronic ozœna; ulceration of larynx and trachea; cachexia; hæmatemesis and melæna; ulceration of Peyer's patches; II. Nævus of thymus gland. (**Specimens presented**, Pathological Society of Philadelphia, Dec. 22, 1887.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 45-47; 270-271.

Actinomycosis hominis. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 102.

On Skerritt's case of extension of the infection from the lungs to the liver *via* the diaphragm.

The etiology of acute endocarditis. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 395.

A further review of the association of micro-organisms with ulcerative endocarditis as shown by the work of Orth, Prudden, and others.

1888

The etiology of cancer. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 18.

Reviews recent observations supporting the parasitic origin of cancer, and the negative culture experiments of Ballance and Shattock.

Two cases of ulcerative endocarditis. (**Specimens presented**, January 12, 1888.) Rept. *Tr. Path. Soc.* Phila., (1887-89), 1891, xiv, 123-124. *Also, Univ. M. Mag.*, Phila., 1888-89, i, 31-32.

Case of cholesteatoma of floor of third ventricle and of the infundibulum. (7 figs.) (**Read before the Philadelphia Neurological Society, January** 25, 1888.) *J. Nerv. & Mental Dis.*, N. Y., 1887, n. s., xiv, 657-673. [*In his:* C. r., 1882-92, ii, No. 81.]

In this, one of his longest case histories, the post mortem, the slides and apparently the drawing were made by Osler himself.

Anæmic necrosis of the heart-muscle. (**Specimen presented**, Pathological Society of Philadelphia, Jan. 26, 1888.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 125-126.

I. Cancer of the mesentery; shortening and matting of the intestinal coil, with simulation of abdominal tumour; II. Multiple aneurisms of aorta; external rupture; III. Aneurisms of the splenic artery; IV. Gall-stone at the orifice of the common duct; hepatic intermittent fever. (**Specimens presented**, Pathological Society of Philadelphia, Feb. 9, 1888.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 51-52; 126-127. *Also, Med. & Surg. Rept.*, Phila., 1888, lviii, 240. *Abstr.: The Epitome*, 1888, ix, 172.

(Cardiac aneurism from an insane man, by Dr. W. B. Jameson, Philadelphia Neurological Society, Feb. 27, 1888.) **Discussion** by Dr. Osler. Rept. *J. Nerv. & Ment. Dis.*, N. Y., 1888, n. s., xv, 252.

Tubercular disease of cæcum and colon; chronic phthisis; typhoid state. (**Specimen presented**, Pathological Society of Philadelphia, Mar. 22, 1888.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 65-66.

Glioma of medulla oblongata. *J. Nerv. & Ment. Dis.*, N. Y., 1888, n. s., xiii, 172-175 (3 fig.) [*In his:* C. r., 1882-92, ii, No. 85.]

Cases of diseases of the appendix and cæcum. *Med. & Surg. Reporter*, Phila., 1888, lix, 419-422. (Presented, Canadian Medical Association, Chatham, September 2, 1885. Rept. *Canad. J. M. Sc.*, Toronto, 1885, x, 283.) [*In his:* C. r., 1882-92, ii, No. 87.]

Seven cases of anomalies of position; eleven cases of ulceration; four cases of obliteration of the lumen of the appendix; six cases of perforation with perityphlytic abscess; two cases of perityphlytic from cæcal diseases—thirty-three cases in all. "I have never met with a foreign body in the appendix."

Pulsating pleurisy. (Presented, [by title], Association American Physicians, Washington, D. C., Sept. 20, 1888.) *Tr. Ass. Am. Physicians*, Phila., 1888, iii, 330-338. *Also, Am. J. M. Sc.*, Phila., 1889, n. s., xcvii, 43-50. [*In his:* C. r., 1882-92, ii, No. 95.]

Yellow fever inoculations. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 465.

On Freire's suppositious micro-organism and its rejection by Sternberg.

The influence of hydrofluoric acid on tubercle bacilli. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 717.

Review of work by Grancher and Chautaud disproving Dr. Trudeau's conclusions.

I. Aneurism of aorta; II. Calcification of dura mater; III. Pachymeningitis hæmorrhagica. (**Specimens presented**, Pathological Society of Philadelphia, Oct. 11, 1888.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 137-138; 217-218.

Note on pachymeningitis hæmorrhagica. (Presented, Philadelphia Neurological Society, Oct. 22, 1888.) Rept. *J. Nerv. & Ment. Dis.*, N. Y., 1888, n. s., xiii, 608-612. *Also, Med. News*, Phila., 1888, liii, 563-565. *Abstr.: The Epitome*, 1888, ix, 607. [*In his:* C. r., 1882-92, ii, No. 90.]

On lesions of the conus medullaris and cauda equina, and on the situation of the ano-vesical centre in man. (Read before the Philadelphia Neurological Society, October 22, 1888.) *Med. News*, Phila., 1888, liii, 669-671, (1 illus.). [*In his:* C. r., 1882-92, ii, No. 91.]

(Embolism of the middle cerebral artery, left hemiplegia, ulcerative endocarditis and late general convulsions, and skin infarcts, by Dr. W. T. Sharpless, Philadelphia Neurological Society, Oct. 22, 1888) **Discussion by Dr. Osler.** Rept. *J. Nerv. & Ment. Dis.*, N. Y., 1888, xv, 620.

Dr. Osler's remarks were confined to embolism.

Acute phthisis; erosion of a large branch of the pulmonary artery; sudden fatal hæmoptysis. (**Specimen presented**, Pathological Society of Philadelphia, Oct. 25, 1888.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 169.

Colitis; gangrenous infarct of lung; pneumothorax. (**Specimen presented**, Pathological Society of Philadelphia, Nov. 8, 1888.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 169-170.

I. Cancer of the stomach; extreme mobility of tumour; II. Partial fusion of the two segments of the pulmonary semilunar valves. (**Specimens presented**, Pathological Society of Philadelphia, Nov. 22, 1888.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 83-84; 151. *Also, Univ. M. Mag.*, Phila., 1888-89, i, 368-370.

The President's address. (Unsigned editorial.) *Med. News*, Phila., 1888, liii, 324.

On the address of Dr. J. S. Billings to the Congress of American Physicians and Surgeons on the origin and growth of the Army Medical Museum, and on the value of museum collections.

1889

The anatomical tubercle. *Montreal M. J.*, 1888-89, xvii, 418-419.

"I have myself eight or ten scars from these warts, which I have had at times on my hands during the past fifteen years. They rarely increase in size beyond a quarter of a dollar piece, are seldom painful, and are only unpleasant on account of the disfigurement. In my case they have lasted variable periods, from four to five weeks to eight or nine months. . . ."

(Hæmorrhage into the centrum ovale of the postero-frontal and parietal lobes, by Dr. A. Eshner. Philadelphia Neurological Society, Jan. 28, 1889.) **Discussion** by Dr. Osler. Rept. *J. Nerv. & Ment. Dis.*, N. Y., 1889, xvi, 177.

"Specimen filed in the museum of McGill College."

Typhlitis and appendicitis. (Presented, Toronto Medical Society, Dec. 26, 1888.) *Canada Lancet*, Toronto, 1888-89, xxi, 193-196.

Acute nephritis in typhoid fever. (**Specimen presented**, Pathological Society of Philadelphia, Feb. 28, 1889.) Rept. *Tr. Path. Soc. Phila.*, (1887-89), 1891, xiv, 200.

Rupture of the heart. (Unsigned editorial.) *Med. News*, Phila., 1889, liv, 129-130.

A critical review of an article by Meyer presenting 9 new cases of this rare condition, and analyzing 25 cases recorded since 1870.

(Chronic endocarditis, by Dr. Francis Delafield, fortieth annual meeting, American Medical Association, June 26, 1889.) **Discussion** by Dr. Osler. Rept. *Boston M. & S. J.*, 1889, cxxi, 38-39.

Sensory aphasia; word blindness with hemianopsia. (**Specimen presented**, fortieth annual meeting American Medical Association, Newport, R. I., June 26, 1889.) Rept. *Boston M. & S. J.*, 1889, cxxi, 39. *Also, Med. Rec.*, N. Y., 1889, xxxv, 713.

Dr. Osler also exhibited some specimens of brains, prepared according to the Italian method, with zinc, zinc chloride, glycerine, etc.

Case of syphiloma of the cord of the cauda equina—death from diffuse central myelitis. *J. Nerv. & Ment. Dis.*, N. Y., 1889, n. s., xiv, 499-507 (1 chart and 5 fig.). [*In his:* C. r., 1882-92, ii, No. 100.]

Note on intrathoracic growths developing from the thyroid gland. *Med. News*, Phila., 1889, lv, 257. [*In his:* C. r., 1882-92, ii, No. 98.]

(Thrombosis of cerebral sinuses and veins, by Dr. A. Brayton Ball. Association of American Physicians, Washington, D. C., Sept. 18, 1889.) **Discussion** by Dr. Osler. Rept. *Tr. Ass. Am. Physicians*, Phila., 1889, iv, 73-74. *Also, Med. Rec.*, N. Y., 1889, xxxvi, 351.

Autopsies performed at the Philadelphia General Hospital, 1885-1889, (unpublished.)

During his four and a quarter years on the clinical staff, Osler performed 162 autopsies, of which forty-eight were on cases of tuberculosis. These records, many of which are in his own handwriting, are still extant. *E. B. K.*

BALTIMORE PERIOD

(1890-1905)

1890

***Rare forms of cardiac thrombi.** *Johns Hopkins Hosp. Rep.*, Balt., 1890, ii, 56-61. [*In his:* C. r., 1882-92, ii, No. 104.]

1891

Interstitial processes in the central nervous system. (Illustrated lecture delivered at the second triennial session of the Congress of American Physicians & Surgeons, Washington, D. C., Sept. 22-25, 1891.) *Tr. Cong. Am. Phys. & Surg.*, 1891, N. Haven, 1892, ii, 144-146. [*In his:* C. r., 1892-97, iii, No. 121.]

Two cases of pernicious malaria. (Johns Hopkins Hospital Medical Society, Oct. 5, 1891.) *Johns Hopkins Hosp. Bull.*, Balt., 1891, ii, 161-162.

Reports of two deaths, with autopsies, one evidently by Dr. Osler, the other by Dr. Welch.

1895

Case of cerebral hæmorrhage in a fœtus. *Teratologia*, Lond. & Edinb., 1895, ii, 13.

1896

On the association of enormous heart hypertrophy, chronic proliferative peritonitis and recurring ascites, with adherent pericardium. (Presented, American Pediatric Society, Virginia Hot Springs, May 28, 1895.) *Arch. Pediat.*, N. Y., 1896, xiii, 1-10. [*In his:* C. r., 1892-97, iii, No. 169.]

1903

Aneurysm of upper part of thoracic aorta. (Proc. Johns Hopkins Hospital Medical Society, Oct. 20, 1902). *Johns Hopkins Hosp. Bull.*, Balt., 1903, xiv, 85.

1905

Report of a case of ulcerative endocarditis, with embolism of the aorta. (Report and specimen presented, Johns Hopkins Hospital Medical Society, Dec. 19, 1904.) *Johns Hopkins Hosp. Bull.*, Balt., 1905, xvi, 118.

OXFORD PERIOD

(1905-1919)

1919

Influenzal pneumonia: bilateral rigidity, spinal meningitis with hæmorrhage into the theca vertebralis and nerve roots. (Case-report and autopsy by Sir Wm. Osler.) *Lancet*, Lond., 1919, i, 501.

"Next morning, in the absence of Major Gibson, I did the post-mortem."

(The last post-mortem he did. *A. M.*)

*Specimen in the Medical Museum of McGill University.

III. CLINICAL MEDICINE

(See also under I. Natural Science, Including Articles of Original Research)

CANADIAN PERIOD

(1869-1884)

1872

Fissure of anus. (Case under care of Dr. D. C. MacCallum, at Montreal General Hospital.) Reported by Mr. W. Osler. *Canada M. J.*, Montreal, 1872, viii, 113-114.

Angina Ludovici. (Case under care of Dr. D. C. MacCallum, at Montreal General Hospital.) Reported by Mr. W. Osler. *Canada M. J.*, Montreal, 1872, viii, 114-115.

Suppurative nephritis. (Case under the care of Dr. D. C. MacCallum. Reported by Mr. W. Osler.) *Canada M. & S. J.* Montreal, 1872, viii, 115-116.

1875

Case of scarlatina miliaris. *Canada M. & S. J.*, Montreal, 1875-76, iv, 49-54. [*In his:* C. r., 1870-82, i, No. 5.]

1876

Anomalies in the development of vaccine pustules. **Translation.** (Heller, *Centralbl. f. d. med. Wissen.*) *Canada M. & S. J.*, Montreal, 1875-76, iv, 449-451.

Passage of an unusually large gall-stone, by Dr. G. von Dessauer (of Valparaiso.) *Virchow's Arch.*, Berlin, 1876, lxvi, 271-272. (**Translation.**) *Canada M. & S. J.*, Montreal, 1875-76, iv, 500-503.

Cites a case seen Dec. 12, 1873, with notes by Virchow and one signed "W. O.", in which Osler records Archer's case seen in the spring of same year.

Treatment of convulsions in children by anæsthetics, by Dr. Ortille. *Bull. de Thérap.*, quoted in *Schmidt's Jahrbücher*, Leipzig, 1876, clxix, 43-44. **(Translation.)** *Canada M. & S. J.*, Montreal, 1875-76, iv, 556-557.

The initial rashes of smallpox. *Canada M. & S. J.*, Montreal, 1876-77, v, 240-254. [*In his:* C. r., 1870-82, i, No. 8.]

Clinical notes on small-pox. I. The initial rashes of small-pox. II. Hæmorrhagic small-pox. III. A form of hæmorrhagic small-pox. Montreal, 1876. Gazette Printing House, 35 pp., 8°. [*In his:* C. r., 1870-82, i, Nos. 8, 9, 10.]

This is a collection of three papers published as a brochure under the main title. The first two appeared in the *Canada M. & S. J.*, 1876-77, v, 241-255; 289-304. The third apparently was added at the time of publication of the brochure.

1877

Hæmorrhagic small-pox. *Canada M. & S. J.*, Montreal, 1876-77, v, 289-304. [*In his:* C. r., 1870-82, i, No. 9.]

1878

The influence of position for hearing heart murmurs. (Read before McGill Medical Society of Montreal, Nov. 24, 1877.) *Canada M. & S. J.*, Montreal, 1877-78, vi, 335. (By title).

After showing some pathological specimens, Dr. Osler is stated to have read the above paper, but neither the article itself nor an abstract is given.

1879

[Lecture on the different forms of phthisis, by Sir Andrew Clark, in the Hall of the Natural History Society, Montreal, Dec. 5, 1878.] **Discussion**, by Dr. Osler. Rept. *L'Union M. du Canada*, Montreal, 1879, viii, 63. *Also, Canada M. & S. J.*, Montreal, 1878-79, vii, 206.

Initial rash in small-pox. (**Case reported** Medico-Chirurgical Society of Montreal, March 21, 1879.) Rept. *Canada M. Rec.*, Montreal, 1878-79, vii, 217.

(Lectures on localization in diseases of the brain. Delivered at the Faculté de Médicine, Paris, 1875, by Prof. J. M. Charcot. Edited by Bourneville, and translated by Dr. Edward P. Fowler.) New York: William Wood & Co., 1878, 133 pp., 8°. (Unsigned **book review.**) *Canada M. & S. J.*, Montreal, 1878-79, vii, 409-410.

II. Acute Bright's disease in a child. Remarkable persistence of blood-corpuscles and casts in the urine after disappearance of albumin. **Medical cases under Dr. Osler.** (Reported by Mr. Andrew Henderson.) *Canada M. & S. J.*, Montreal, 1878-79, vii, 455.

III. Aphasia with right-sided hemiplegia, coming on fifteen days after delivery. **Medical cases under Dr. Osler.** (Reported by D. Mignault, B.A.) *Canada M. & S. J.*, Montreal, 1878-79, vii, 492-493.

IV. Acute rheumatism treated with salicylate of soda. Delirium apparently caused by remedy. **Medical cases under Dr. Osler.** (Reported by B. E. Mackenzie, B.A.) *Canada M. & S. J.*, Montreal, 1878-79, vii, 493-494.

V. Concussion of brain—temporary hemiplegia—general convulsions—rapid recovery; VI. Aggravated stuttering, following fall on the head. **Medical cases under Dr. Osler.** (Reported by Dr. Imrie.) *Canada M. & S. J.*, Montreal, 1879-80, viii, 8-9.

VII. Extreme irregularity of heart. **Medical cases under Dr. Osler.** (Reported by Mr. E. J. Rogers.) *Canada M. & S. J.*, Montreal, 1879-80, viii, 9-10.

VIII. Chronic pleurisy; flattening of sides of chest. **Medical cases under Dr. Osler.** (Reported by Mr. W. McEachran.) *Canada M. & S. J.*, Montreal, 1879-80, viii, 109-111.

1880

On the systolic brain murmur of children. *Boston M. & S. J.*, 1880, ciii, 29-30. [*In his:* C. r., 1870-82, i, No. 30.]

On heredity in progressive muscular atrophy as illustrated in the Farr family of Vermont. *Arch. Med.*, N. Y., 1880, iv, 316-320. [*In his:* C. r., 1870-82, i, No. 33.]

(Chronic dementia, by Dr. Hy. Howard, Medico-Chirurgical Society of Montreal, March 19, 1880.) **Discussion** by Dr. Osler. Rept. *Canada M. & S. J.*, Montreal, 1879-80, viii, 450. *Also, Canada, Med. Rec.*, Montreal, 1879-80, viii, 195.

On a remarkable heart-murmur, heard at a distance from chest-wall. (Patient presented Medico-Chirurgical Society of Montreal, April 30, 1880.) *Med. Times & Gaz.*, Lond., 1880, ii, 432-433. Rept. *Canada M. & S. J.*, Montreal, 1879-80, viii, 518-519. *Also, Med. & Abstr.*, Phila., 1881, 31-33. [*In his:* C. r., 1870-82, i, No. 34.]

Retro-peritoneal cancer. **Medical cases under Dr. Osler.** (Reported by Mr. J. W. Ross.) *Canada M. & S. J.*, Montreal, 1880-81, ix, 161-162.

1881

Clinical lecture in idiopathic or pernicious anæmia. *Canad. J. M. Sc.*, Toronto, 1881, vi, 135-141. [*In his:* C. r., 1870-82, i, No. 39.]

Case I. **Apex pneumonia; resolution in the fourth week.** Case II. **Pneumonia of right lung; resolution in eighth week.** (Presented Medico-Chirurgical Society of Montreal, Nov. 12, 1880.) *Canada M. & S. J.*, Montreal, 1880-81, ix, 352-353.

Clinical cases with recovery illustrating paper on "Delayed Resolution in Pneumonia" presented at this meeting. (Listed under II. 2).

Clinical lecture on a case of fibroid phthisis. (Delivered at the Montreal General Hospital in the summer session course, May 10, 1881.) *Canada M. & S. J.*, Montreal, 1880-81, ix, 641-650. [*In his:* C. r., 1870-82, i, No. 40.]

(Empyema. By Dr. Phelps. Presented Medico-Chirurgical Society of Montreal, May 27, 1881.) **Discussion** by Dr. Osler. Rept. *Canada M. & S. J.*, Montreal, 1880-81, ix, 746.

1882

A clinical lecture on empyema and its antiseptic treatment. (Delivered at Montreal General Hospital, June 24, 1882. Reported by S. A. Abbott, of the Hansard Staff.) *Med. News*, Phila., 1882, xli, 113-115. [*In his:* C. r., 1882-92, ii, No. 50.]

(Climatology, by Dr. Worthington. Fifteenth annual meeting Canada Medical Association at Toronto, Sept. 8, 1882.) **Discussion** by Dr. Osler. Rept. *Med. News.*, Phila., 1882, xli, 357.

Summer session clinics. No. 1. **Cases of inherited syphilis.** No. 2. **Acute Bright's disease.** Nos. 3-4. **Pneumonia.** No. 5. **Leucocythæmia.** Montreal, 1882, 44 p., 8°. [*In his:* C. r., 1882-92, ii, No. 48.] No. 1 published *also* under title "**Clinical remarks on cases of inherited syphilis.**" *Canada M. & S. J.*, Montreal, 1881-82, x, 588-592. No. 5 *also* under title "**Clinical remarks on leucocythæmia**, *Ibid*, 719-727.

Obstinate quotidian ague. *Canada M. & S. J.*, Montreal, 1882-83, xi, 29-30.

Clinical notes on hæmatemesis in chronic splenic tumour. (Read before Medico-Chirurgical Society of Montreal, Oct. 20, 1882.) *Canada M. & S. J.*, Montreal, 1882-83, xi, 267-270. Rept. *Canada M. Rec.*, Montreal, 1882-83, xi, 30. *Also, Med. News*, Phila., 1882, xli, 581.

On echinococcus disease in America. (Presented at the Canada Medical Association, Toronto, Sept. 6, 1882.) *Am. J. M. Sc.*, Phila., 1882, n. s., lxxxiv, 475-480. Rept. *Med. News*, Phila., 1882, xli, 354. *Also, Canada Lancet*, Toronto, 1882-83, xv, 44-45: *L'Union Méd. du Canada*, Montreal,

1882, xi, 521. *Edit.: Med. News,* Phila., 1884-85, xlvii, 132. [*In his:* C. r., 1882-92, No. 62.]

Communicates the results of an enquiry into the prevalence of the affection in North America, with sixty-one cases collected from journals and private sources.

1883

Preataxic tabes dorsalis. *Med. News,* Phila., 1883, xliii, 197-199. [*In his:* C. r., 1882-92, ii, No. 56.]

(Tonsillotomy and uvulotomy, by Dr. Mills. Presented Medico-Chirurgical Society of Montreal, Feb. 2, 1883.) **Discussion** by Dr. Osler. Rept. *Canada M. & S. J.,* Montreal, 1882-83, xi, 498.

[Remarks on pigeon-breast.] (Medico-Chirurgical Society of Montreal, Feb. 2, 1883.) **Discussion.** Rept. *Canada M. & S. J.,* Montreal, 1882-83, xi, 498.

Clinical remarks on the nephritis of pregnancy. (Delivered during the summer session of the McGill Medical Faculty, April 10, 1883.) *Canad. Pract.,* Toronto, 1883, viii, 133-137.

A case for localization. (Living case presented Medico-Chirurgical Society of Montreal, April 27, 1883.) Rept. *Canada M. & S. J.,* Montreal, 1882-83, xi, 682-683. *Also, Canada M. Rec.,* Montreal, 1882-83, xi, 197-198. *Also, Med. News,* Phila., 1883, 636.

This case formed the basis of his study of Jacksonian epilepsy listed below in this rubric, and the pathological specimen obtained at the autopsy some months later was also presented at the Society on Dec. 14, 1883, and is listed above in Rubric II. 2.

Empyema, discharging through lung, recovery. (**Account given** before Medico-Chirurgical Society of Montreal, May 11, 1883.) Rept. *Canada M. & S. J.,* Montreal, 1882-83, xi, 743-744. *Also, Can. M. Rec.,* 1882-83, xi, 223.

Dr. Osler said that the late Dr. R. L. MacDonnell of Montreal was, he believed, after Hippocrates, the first to notice the occurrence of perforation into the lung in empyema, and recorded seven or eight cases. Traube in 1871-72 claimed to be the first, but was mistaken.

Hydatids in urine. (**Specimen presented** Medico-Chirurgical Society of Montreal, June 14, 1883.) Reported *Canada M. & S. J.,* Montreal, 1883-84, xii, 102.

Clinical remarks on a case of Hodgkin's disease. (One full-page cut.) *Canada M. & S. J.,* Montreal, 1882-83, xi, 712-717. [*In his:* C. r., 1882-92, ii, No. 55.] (**Living case presented** Medico-Chirurgical Society of Montreal, June 14, 1883. Rept. *Ibid.,* 1883-84, xii, 101-102.)

On some natural modes of cure in empyema. (Abstract of a clinical lecture delivered during the summer session of the McGill Medical Faculty, June 20, 1883.) *Med. Rec.,* N. Y., 1883, xxiv, 429-431. [*In his:* C. r., 1882-92, ii, No. 58.]

Some features in chronic Bright's disease. (Presented Canada Medical Association, Med. Sec., Kingston, Sept. 6, 1883.) **Remarks** rept. *Canada Lancet,* Toronto, 1883-84, xvi, 52.

Larvæ of Musca lucilia in man (maggots in the ear). (**Specimen presented,** Medico-Chirurgical Society of Montreal, Oct. 26, 1883.) Rept. *Canada M. & S. J.,* Montreal, 1883-84, xii, 294.

1884

(Preataxic tabes dorsalis, by James Stewart. Read before Medico-Chirurgical Society of Montreal, Dec. 14, 1883.) **Discussion** by Dr. Osler. Rept. *Canada M. Rec.*, Montreal, 1883-84, xii, 81-82. *Also, Med. News,* Phila., 1884, xliv, 82.

(Some varieties of dyspnœa met with in Bright's disease, by Dr. R. P. Howard. Canadian Medical Association, Montreal, Aug. 25, 1884.) **Discussion** by Dr. Osler. Rept. *Canada Lancet,* Toronto, 1884-85, xvii, 48.

Cerebro-spinal meningitis, by Dr. Harrison. Canadian Medical Association, Montreal, August 25, 1884.) **Discussion,** by Dr. Osler. Rept. *Canada Lancet,* Toronto, 1884-85, xvii, 48.

Pneumonia as a contagious disease. (Presented Canadian Medical Association, Aug. 27, 1884.) *Canad. Pract.*, 1884, ix, 325.

The above was presented as an abstract.

Dr. Flint's address. (Unsigned editorial.) *Med. News,* Phila., 1884, xlv, 603-604.

Review of an address on therapeutics (New York State Medical Association), stressing the dangers of an extreme reaction from the Nihilistic doctrines.

Medical diagnosis; a manual of clinical methods, by J. Graham Brown. 2. ed., illustrated. Edinburgh: Bell and Bradford, 1884. (Initialled **book review**). *Am. J. M. Sc.*, Phila., 1884, n. s., lxxxvii, 560.

PHILADELPHIA PERIOD

(1885-1889)

1885

Remarks on clinical cases. *Canada M. & S. J.*, Montreal, Jan., 1885, (1884-85), xiii, 328-333. **I. Typhoid fever; II. Heart disease: action of digitalis; III. Caisson disease; IV. Emphysema-bronchitis.** [*In his:* C. r., 1882-92, ii, No. 60.]

Marks the fresh departure toward clinical studies which characterized Osler's transitional Philadelphian period, replete with therapeutic measures.

(Hysterical affections of the eye, by George C. Harlan. Philadelphia Neurological Society, Jan. 26, 1885.) **Discussion** by Dr. Osler. Rept. *J. Nerv. & Ment. Dis.*, 1885, xii, 81.

A contribution to Jacksonian epilepsy and the situation of the leg centre. *Am. J. M. Sc.*, 1885, n. s., lxxxix, 31-37. [*In his:* C. r., 1882-92, ii, No. 61.] *Rev.: Boston M. & S. J.*, 1885, cxii, 587. *Also, Med. Times & Gaz.*, Lond., 1885, i, 159: *Med. News,* Phila., 1884, xliv, 82.

This study was based on a living case presented at the Medico-Chirurgical Society of Montreal, April 27, 1883 (listed above in this rubric under Canadian Period), and the specimen obtained at the autopsy was presented to this Society on Dec. 14, 1883 (listed above under title "Fibroglioma of upper end of ascending frontal gyrus; Jacksonian epilepsy of fourteen years' standing; the leg centre," in Rubric II. 2.)

(Epidemic cerebro-spinal meningitis, by Dr. Worthington, Canadian Medical Association, Chatham, Ont., Sept. 2, 1885.) **Discussion** by **Dr. Osler.** Rept. *Med. News,* Phila., 1885, xlvii, 380.

Diseases of the substance of the heart: Malpositions of the heart; myocarditis; chronic myocarditis [fibroid heart]; the degenerations of the heart-muscle; spontaneous rupture of the heart; atrophy of the heart; hypertrophy of the heart; dilatation of the heart; aneurism of the heart; adventitious products in the heart. *In:* A System of Practical Medicine, edited by Wm. Pepper, Phila., 1885, iii, 601-638. [*In his:* C. r., 1882-92, ii, No. 66.]

Hydatids passed with the urine. (**Specimen presented**, Pathological Society of Philadelphia, June 25, 1885.) Rept. *Tr. Path. Soc., Phila.*, (1883-85), 1886, xii, 217-218. *Also, Med. News*, Phila., 1885, xlvii, 183-184. *Edit.: Med. News*, Phila., 1885, xlvii, 132.

> Specimen was given to Osler by Dr. Palmer Howard. He refers to sixty-seven cases collected from the literature by him. "In not one case of these was the cyst in the kidney."

Diseases of the blood and blood-glandular system: Introduction; plethora; anæmia; chlorosis, melanæmia; progressive pernicious anæmia; leukæmia; Hodgkin's disease; hæmophilia; Addison's disease; other diseases of the suprarenal bodies. *In:* A System of Practical Medicine, edited by Wm. Pepper, Phila., 1885, iii, 882-950. [*In his:* C. r., 1882-92, ii, No. 67.]

Review of recent works on practice. I. Lectures on the principles and practice of medicine, by Nathan Smith Davis; II. A text-book of practical medicine, by Alfred Loomis; III. A treatise on the theory and practice of medicine, by John Syer Bristowe. *Am. J. M. Sc.*, Phila., 1885, n. s., lxxxix, 175-181.

> This learned and exhaustive review begins with the words: "In a review, written in 1881, we remarked upon the paucity of American text-books of medicine, and upon the modesty of the sixty-five professors of 'Theory and Practice' who for nearly twenty years had left the field in possession of foreign authors, with whom Wood and Flint alone competed." About the therapeutic action of alcohol, the reviewer states: "On the question of the use of alcohol Dr. Davis is clear and emphatic, and if his opinions prevail with the staff of the Mercy Hospital, the item of 'Wine and Spirits' in the annual account must be very small. He holds that from first to last it acts as a *paralyzant* and anæsthetic, and is in no sense a stimulant. As a result of thirty-five years clinical study of the effects of alcohol in all forms of low febrile diseases, he has never yet found an instance in which it increased the cardiac force or the efficiency of the circulation. Place this negative statement against the very positive assertions of so many other observers, and we have an illustration of how difficult it is to get at therapeutical truth, and how much must be allowed for 'personal equation' in the observer."

Diagnosis of diseases of the spinal cord, by Dr. W. R. Gowers. (Initialled **book review.**) *Am. J. M. Sc.*, Phila., 1885, n. s., lxxxix, 218-219.

I. Recherches cliniques et thérapeutiques sur l'epilepsie, l'hystérie et l'idiotie. Compte rendu du service des épileptiques et des enfants idiots et arrières de Bicêtre pendant l'année, 1881, by Bourneville. II. The same for the year 1883. (Initialled **book review.**) *Am. J. M. Sc.*, Phila., 1885, n. s., lxxxix, 226-227.

> "These valuable reports offer an excellent illustration of what good work can be done when the clinical and pathological material of an institution is fully utilized."

(Diseases of the brain and spinal cord, a guide to their pathology, diagnosis, and treatment, with an anatomical and physiological introduction, by David Drummond.) (Initialled **book review.**) *Am. J. M. Sc.*, Phila., 1885, n. s., lxxxix, 240-241.

Diseases of the spinal cord, by Byrom Bramwell. 2nd. ed., Edinburgh; Young J. Pentland, 1884. (Initialled **book review.**) *Am. J. M. Sc.*, Phila., 1885, n. s., xc, 504.

Removal of a brain tumour. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvi, 75.

Discusses advantage of correct cerebral localization in Jacksonian epilepsy, with reference to operative intervention. Quotes his own case published in the *Am. J. M. Sc.*, Phila., Jan., 1885.

Pulmonary syphilis. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvi, 75-76.

The thyroid gland and myxœdema. (Unsigned editorial.) *Med. News.* Phila., 1885, xlvi, 381.

Review of Victor Horsley's work on experimental myxœdema.

A system of practical medicine by American authors. (Edited by William Pepper. Vol. i, pathology and general diseases, Philadelphia: Lea Bros. & Co., 1885, 1094 pp., 8°. (Unsigned **book review.**) *Med. News*, Phila., 1885, xlvi, 383.

Dry pleurisies. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvi, 489-490.

Critique of Sir Andrew Clark's Lumleian lecture.

Inoculation against cholera. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvi, 577.

Lectures on diseases of the nervous system, especially in women, by S. Weir Mitchell. 2. ed., Philadelphia: Lea Bros. & Co., 1885, 287 pp. (5 plates). 8°. (Unsigned **book review.**) *Med. News*, Phila., 1885, xlvii, 162.

Cholera: Its origin, history, causation, symptoms, lesions, prevention and treatment. By Alfred Stillé, Phila., Lea Bros. & Co., 1885, 164 p. 12°. A treatise on Asiatic cholera. Edited and prepared by Charles Wendt and others, vol. viii, 903. New York, Wm. Wood & Co., 1885. (Unsigned **book review.**) *Med. News*, Phila., 1885, xlvii, 216-217.

On sclerosis of the spinal cord: including locomotor ataxia, spastic spinal paralysis, etc., by Julius Althouse. New York: G. P. Putman's Sons, 1885, xii, 394 pp., 12°. (Unsigned **book review.**) *Med. News*, Phila., 1885, xlvii, 272-273.

A hand-book of the diseases of the liver, biliary passages and portal vein. By Henry R. Ruckley, 8°, pp. 221. High Wycombe, F. Westfield, Lond., W. Kent & Co. (Unsigned **book review**). *Med. News*, Phila., 1885, xlvii, 325.

Bacteria in therapeutics. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 351.

Critique of Cantani's eperiment introducing bacterium termo by inhalation in a case of extensive tuberculous cavitation with high fever.

Floating liver. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 374.

Review of article by Landau on this rare condition.

Phosphorus in rachitis. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 375-376.

On Kassowitz's experience with 1224 cases.

Rare nervous symptoms in diphtheria. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 435.

Durande's remedy for gall-stones, formulated in 1774. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 436-437.

Sulphuric ether (three parts) and turpentine (two parts).

Chorea. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 574-575.

Affirms the existence of chorea as a distinct disease, like epilepsy, or tetanus.

The cure of angina pectoris. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 600-601.

Reviews an article by Huchard in which the iodides are recommended.

The causes of sudden death. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 630-631.

An editorial evoked by the then recent sudden death of Vice-President Hendricks.

Hand-book of general therapeutics in seven volumes. Edited by H. von Ziemssen. [London: Smith, Elder, & Co., 1885.] Vol. i, Dietary of the sick; Vol. ii, Methods of treatment; Vol. iii, Respiratory therapeutics, New York: Wm. Wood & Co., 1885. (Unsigned **book review.**) *Med. News*, Phila., 1885, xlvii, 632-633.

A new hypnotic. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 662.

Hypnone or phenyl-methyl acetone.

The primary muscular atrophies. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 681-682.

A critical review of articles by Charcot and his pupils, Marie and Guinon.

Lanolin: a new basis for ointments. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 711.

Review of article by Liebreich (1885).

Aspergillus from the lung. (**Specimen presented,** Pathological Society of Philadelphia, Oct. 8, 1885.) Rept. *Tr. Path. Soc. Phila.*, (1885-87), 1887, xiii, 108-109.

1886

The cold bath in typhoid fever. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 13-14.

Considers the utility of this measure, which, "is not yet settled even in Germany."

Analgesia from local irritation. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 15.

A review of Brown-Séquard's communications to the Academy of Sciences of Paris on the inhibitory effects on the superior laryngeal nerve, produced by irritation of its terminal filaments in the mucous membrane of the larynx.

Dementia paralytica and syphilis. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 40-41.

Denounces the publication in the lay press of an autopsy on a prominent actor with discussion as to whether the case was one of dementia paralytica or cerebral syphilis. "If statistics are worth anything, we must regard syphilis as a most important factor of two very common diseases of the nervous system, tabes dorsalis and general paresis."

Intraparenchymatous injections in pneumonia. (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 41-42.

On Lépine's practice of injection of bichloride of mercury, and later of iodide of sodium, (*Revue de Méd.*, Dec. 10, 1885). "When the disease is advancing, we should consider this method of very doubtful value," and any good effects from it to be due rather to general than local causes.

Infantile paralysis of cerebral origin. (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 75-76.

A review of important articles by Strümpell (*Deut. med. Woch.*, x, 44), and Ranke (*Jahrb. f. Kinderheilk.*, xxiv, 1 & 2), defining the condition termed "polioencephalitis acuta," which "would seem, in the majority of instances, at least, to be simply the early stage of the spastic hemiplegia described by Ross, Charcot and others."

The treatment of profuse hæmoptysis. (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 104-105.

On an interesting discussion on this subject at the Medical Society of London, introduced by Samuel West.

Is amyloid degeneration curable? (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 125.

On a discussion at the Berlin Medical Society.

(A handbook on the diseases of the nervous system, by James Ross, Philadelphia, Lea Bros. & Co., 1885.) **Unsigned book review.**) *Med. News,* Phila., 1886, xlviii, 128.

Mitral stenosis. (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 149-150.

Reviews articles by Flint, Broadbent and others.

Hereditary chorea. (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 210.

Discusses articles by Peretti (1885).

Muscle and tendon reactions. (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 211-212.

Reviews the investigations of Weir Mitchell and Morris Lewis.

The physical signs of mitral stenosis. (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 239-240.

A further discussion of the valuable papers by Flint and Broadbent.

Extra-uterine changed to intra-uterine pregnancy by electricity. (Correspondence initialled **E. Y. D.**). *Med. News,* Phila., 1886, xlviii, 279.

"Signed E. Y. D., i.e., the well-known Egerton Y. Davis, but, signature and title notwithstanding, a serious contribution, refuting an impossible claim made in a previous number of the journal."

Intraparenchymatous injections in phthisis. (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 296.

Notes that Pepper has had satisfactory results with this method, and gives Gouguenheim's experiences with iodoform, carbolic acid, iodide and corrosive sublimate.

A sublimate soap. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 326-327.

An account of Grissler's sublimate soap favorably reported on by Johne (1886), as killing anthrax filaments and spores.

The Weir Mitchell treatment. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 491-492.

On the adoption of the method abroad, with remarks on a lecture by Prof. Leyden (Berlin), on Mitchell's book "Fat and blood."

The surgery of the lungs. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 519-520.

Reviews an article by Truc (1886).

Urethan. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 551-552.

The temperature of peripheral parts. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 658-659.

On the use of arsenic in certain forms of anæmia. (Read before Philadelphia County Medical Society, Sept. 22, 1886.) *Therap. Gaz.*, Detroit, 1886, 3 s., ii, 741-746. *Abstr.*: *Braithwaite's Retrospect of Medicine*, 1889-99, xcv, 23. [*In his:* C. r., 1882-92, ii, No. 73.]

A specimen sent him by Dr. Rogers (Denver, Col.), with "excellent description" and full history.

Multiple neuritis. (Unsigned editorial.) *Med. News*, Phila., 1886, xlix. 10-11.

Reviews an article from the clinic of Massius of Liege (1886).

Thomsen's disease. (Unsigned editorial.) *Med. News*, Phila., 1886, xlix, 292-293.

Reviews a monograph by Erb (1886).

Is cirrhosis of the liver curable? (Unsigned editorial.) *Med. News*, Phila., 1886, xlix, 327.

Criticism of a discussion in the *Société médicale des hôpitaux.*

Perléche. (Unsigned editorial.) *Med. News*, Phila., Phila., 1886, xlix, 357. Reviews article by Lemaistre.

Hysterical apoplexy. (Unsigned editorial.) *Med. News*, Phila., 1886, xlix, 380.

On a case reported by Debove.

Intestinal occlusion by gall-stones. (Unsigned editorial.) *Med. News*, Phila., 1886, xlix, 407.

[Iodide of sodium, cocaine, and amyl nitrite, in angina pectoris.] (Unsigned editorial.) *Med. News*, Phila., 1886, xlix, 409.

Thoracocentesis for pleuritic effusion. (Unsigned editorial.) *Med. News*, Phila., 1886, xlix, 441-442.

Discusses medicinal versus surgical treatment.

[Actinomycosis.] (Unsigned editorial.) *Med. News*, Phila., 1886, xlix, 443.

Refers to this as the first advanced case in man in this country, presented at Chicago Medical Society by Dr. Schrimer.

Perforating appendicitis. (Unsigned editorial.) *Med. News*, Phila., 1886, xlix, 461-462.

Review of an article by Fitz.

[Bad pathology and good surgery.] (Unsigned editorial.) *Med. News,* Phila., 1886, xlix, 463.

On a case of pyelonephritis reported as Bright's disease.

[Injury to James P. White.] (Unsigned editorial.) *Med. News,* Phila., 1886, xlix, 600.

Correlation of tonsils and genitals. (Unsigned editorial.) *Med. News,* Phila., 1886, xlix, 634.

Report of recent discussion on this subject at the Hunterian Society.

The treatment of pneumonia. (Unsigned editorial.) *Med. News,* Phila., 1886, xlix, 660-661.

On the treatment of pleurisy with effusion by Hay's method. (Abstract of a clinical lecture delivered at the hospital of the University of Pennsylvania, Dec. 2, 1886.) *Med. News,* Phila., 1886, xlix, 645-646. *Abstr.: Braithwaite's Retrospect of Medicine,* 1887, xcv, 70-72.

Aneurisms of the aorta, with especial reference to their position, direction, and effects, being an exercise for an act of the degree of M.B. in the University of Cambridge. By Oswald Browne, xv, 18 pp., London, H. K. Lewis, 1885. (Initialled book review.) *Am. J. Med. Sc.,* Phila., 1886, n. s., xci, 246-247.

Surgical myxœdema. (Unsigned editorial.) *Med. News,* Phila., 1886, xlix, 661-662.

(A treatise on the principles and practice of medicine, by Dr. Austin Flint, assisted by William H. Welch and Austin Flint, Jr. 6. ed., [revised]. Philadelphia: Lea Bros. & Co., 1886, 1160 pp. 8°.) Unsigned book review. *Med. News,* Phila., 1886, clix, 663-664.

The treatment of rheumatic fever. (Unsigned editorial.) *Med. News,* Phila., 1886, xlix, 688.

A sequel to a series of articles in the News on methods in Philadelphia (p. 627), New York (p. 655), and Boston (p. 685) hospitals.

[Abstracts on medicine.] *Am. J. M. Sc.,* Phila., 1886, n. s., xci, 591-603; xcii, 531-545. (Published under the heading: Quarterly summary of the progress of medical science.)

In April, 1886, Dr. Osler's name first appears in the *American Journal of the Medical Sciences* as in charge of the Department of Medicine. The July number contains no department of medicine, and in the October number, 1886, Dr. Osler is assisted by Drs. J. P. Crozier Griffith and Walter Mendelson, also in 1887, n. s., xciii, 225-239; 531-542; xciv, 225-236; 528-545. In 1888 with volume xcv, the journal became a monthly, and the abstracts appear on pages 75-80; 182-190; 286-294; 398-410; 511-519; 617-627; n. s., xcvi, 69-78; 178-188. 292-300; 405-413; 514-527; 618-626. So also through the two volumes of 1889. In 1890, the department is under W. Osler and J. P. Crozier Griffith. His connection with the Department then lapses until April, 1895, from which date until April, 1901, it is in charge of W. Osler and George Dock. From May, 1901, until July, 1911, it is conducted by W. Osler and W. S. Thayer, and after this date by Dr. Thayer alone.*

1887

Antifebrin. (Four charts.) *Therap. Gaz.,* Detroit, 1887, 3. s., iii, 163-167. *Also, Tr. Coll. Phys.,* Phila., 1887, 3 s., ix, 117-118. (Reply in discussion,

* For paging of these Abstracts in the *Am. J. M. Sc.,* after 1895 see footnote on page 559 at end of this Rubric.

March 15, 1887, by Drs. Parvin, Wood, Mitchell, Fisher and Griffith, p. 119.) Editorially reviewed in *Maryland M. J.*, 1886-87, xvi, 427-428. [*In his*: C. r., 1882-92, ii, No. 77.]

"These humble observations confirm those of Cohn and Happ and others, and I think that we have in antifebrin a prompt and powerful agent easy to take and free from unpleasant effects."

(Forms of typhoid fever simulating remittent malarial fever, by I. E. Atkinson, June 3, 1887.) **Discussion** by Dr. Osler. Rept. *Trans. Assn. Am. Phys.*, 1887, ii, 230.

The treatment of pneumonia in the Philadelphia hospitals. Notes from the hospital of the University of Pennsylvania.) Rept. *Med. News*, Phila., 1887, l, 260-261.

"Dr. Osler in hospital practice recognizes two groups of pneumonia patients—the alcoholic and the temperate—a majority of the former die in spite of all treatment."

The treatment of rheumatism in the Hospital of the University of Pennsylvania. *N. Carolina M. J.*, March, 1887. *Abstr.: Canad. Pract.*, 1887, xii, 82-83.

Tonsillitis in adolescents. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 44-45.

Forms of albuminuria not dangerous to life. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 71-72.

Corrosive sublimate in typhoid fever. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 101-102.

Rectal injections of gas. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 127-128.

A humorous exposition of Bergeon's treatment of tuberculosis by sulphuretted hydrogen.

Antifebrin. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 159.

Multiple neuritis. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 160.

On Dr. Allen Starr's Middleton Goldsmith Lectures on this disease, first described "by that great New England physician, James Jackson (1822)."

Aspiration of the stomach. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 161.

An unfavorable review of this procedure in a case of alcoholic coma.

Protective inoculation against rabies. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 185; 213-214.

Announcing confirmation of Pasteur's work by Ernst of Harvard and Frisch of Vienna.

Laparotomy in peritonitis. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 241.

A review of three communications pronouncing in favour of early operative interference.

Sudden death in pleurisy. (Unsigned editorial.) *Med. News*, Phila., Phila., 1887, l, 241-242.

The treatment of pneumonia in the Philadelphia hospitals. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 260-261.

Calomel as a diuretic. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 268.

A review of recent articles on the efficacy of divided doses in the dropsy of heart disease.

The prognosis in chronic valvular diseases of the heart. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 295-296.

On an important statistical communication by Sir Andrew Clark.

Paroxysmal cardiac dyspnœa. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 296.

On the article by Dr. Loomis in this number (evidencing Osler's editorial connection with this Journal).

[On the value of liquid vaseline for hypodermic use.] (Unsigned **editorial.**) *Med. News*, Phila., 1887, l, 298.

On a formula used by Meunier, of Lyons.

[Cholecystectomy.] (Unsigned **editorial.**) *Med. News*, Phila., 1887, l, 298.

Reviews first cases reported in this country by Ohage, of St. Paul.

The treatment of pneumonia. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 324.

Refers to treatment in Philadelphia, New York and Boston hospitals, and to "the daring experiments of Hughes Bennett, Skoda and Deitl," which placed the treatment of pneumonia on a rational basis.

Hepatic phlebotomy and puncture. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 325-326.

Discusses the dangers of this procedure as used in military practice.

(Administration of gaseous enemata in phthisis, by J. Solis-Cohen, Philadelphia County Medical Society, March 9, 1887.) **Discussion** by Dr. Osler. Rept. *Med. News*, Phila., 1887, l, 353. Reviewed in *Boston M. & S. J.*, 1887, cxvi, 294.

On the general etiology and symptoms of chorea. Based on the records of 410 cases at the Infirmary for Nervous Diseases, Philadelphia. *Med. News*, Phila., 1887, li, 437-441; 465-470. [*In his*: C. r., 1882-92, ii, No. 80.]

Rectal injections of gas in the treatment of phthisis. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 377.

A cutting denunciation of the premature publicity and unwarranted hopes aroused through the lay press by the so-called Bergeon's treatment.

Etiology of gastric ulcer. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 412.

Treatment of the morphia habit. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 439.

On Jennings' suggestion (1887) of application of the Weir Mitchell treatment.

The functions of the thyroid gland. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 523-524.

On the experiments of Ewald (1887).

Waking numbness. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 629.

On a phenomenon reported by A. H. Smith and already described by Weir Mitchell in 1881.

The irritable heart of civil life. (Lecture delivered before Toronto Medical Society, April 14, 1887.) Rept. *Canada M. & S. J.*, Montreal, 1886-87, xv, 617-619. *Also, Canad. Pract.*, 1887, xii, 156-157.

Notes and comments: [I. True heart strain; II. Spurious, mimic or phantom traumatic aneurism; III. Leeching in over distention of the right ventricle; IV. Urethan and paraldehyde in the insomnia of heart disaese; V. Hydrotherapy in the treatment of typhoid fever.] *Canada M. & S. J.*, Montreal, 1886-87, xv, 764-767.

Bergeon's method of treating phthisis. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 19.

A third editorial on treatment by rectal injection by gas.

Professor Flint's address. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 296.

Address before the Ninth International Medical Congress on fever.

Intermittent albuminuria. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 428.

***Cirrhosis of the liver in children.** (Unsigned editorial.) *Med. News*, Phila., 1887, li, 428-429.

Review of an elaborate study by R. P. Howard, of Montreal.

The dyspnœa of asthma and its treatment. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 482.

Chorea and heart disease. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 509.

An editorial on his own article (*Am. J. M. Sc.*, Oct., 1887).

On the incidence of albuminuria among the sick. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 547.

Cold water injections in catarrhal jaundice. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 576-577.

Anæmia, by Frederick P. Henry. Philadelphia: P. Blakiston, Son & Co., 1887, 136 pp. 8°.) Unsigned **book review.** *Med. News*, Phila., 1887, li, 577-578.

The variations of the normal knee-jerk. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 601.

Review of recent work done by Mitchell and Lewis and Lombard.

Alternating pyrexia in Hodgkin's disease. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 661-662.

Gall-stones and pernicious anæmia. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 686.

Treatment of typhoid fever in the Philadelphia hospitals. (Hospital notes from the hospital of the University of Pennsylvania.) Rept. *Med. News*, Phila., 1887, li, 679-680. *Abstr.: Braithwaite's Retrospect of Medicine*, 1888, xcvii, 234-235.

The treatment of typhoid fever. (Unsigned editorial.) *Med. News*, Phila., 1887, li, 739-740.

On reports received from the Philadelphia, Boston and New York hospitals, published in recent issues of the *News*, evidently as a result of the activities of its editorial board.

Mental affections associated with chronic Bright's disease. (Presented, Philadelphia Neurological Society, Oct. 24, 1887.) *J. Nerv. & Ment. Dis.*, N. Y., 1887, xiv, 771-772. *Rev.: Boston M. & S. J.*, 1888, cxviii, 53.

*Specimen in the Medical Museum of McGill University.

(Lavage in the treatment of gastric affections, by Solomon Solis-Cohen. (Presented Philadelphia County Medical Society, Nov. 9, 1887.) **Discussion** by Dr. Osler. Rept. *Maryland M. J.*, 1887-88, xviii, 69.

"I am of the opinion that this measure has a much narrower field than the statements of the French and German writers would lead one to infer. . I should not hesitate to predict that within a few years, when the fashion has subsided, this measure will be confined entirely to cases of obstinate gastric catarrh, in which it is of inestimable service, and to cases of dilatation of the stomach, in which it is not only of service but absolutely indispensable."

[Abstracts on medicine.] (**Under charge of W. Osler**, assisted by J. P. Crozier Griffith, and Walter Mendelson.) *Am. J. M. Sc.*, 1887, n. s., xciii, 225-239; 531-542; n. s., xciv, 225-236; 528-545.

1888

The cerebral palsies of children. (Clinical lectures delivered at the Infirmary for Nervous Diseases: Lecture I. **Introduction, infantile hemiplegia.** Lecture II. **Infantile hemiplegia,** (concluded.) Lecture III. **Bilateral spastic hemiplegia.** Lecture IV. **Spastic paraplegia.** Lecture V. **Pathology and treatment.**) *Med. News*,, Phila., 1888, liii, 29-35; 57-66. (2 illus.); 85-90; 113-116; 141-145; (4 illus.) *Also*, Phila., P. Blakiston, Son & Co., 111 p., 8°: London H. K. Lewis, 1889. Review in *B. M. J.*, Lond., 1889, i, 1297. *Also, Med. Rec.*, N. Y. ,1890, xxxvii, 160. [*In his:* C. r., 1882-92, ii, No. 86.]

The leading articles in five consecutive numbers of the *Med. News*, from July 14 to August 11, 1885. They present an exhaustive survey of this subject based on a large series of illustrative cases.

Diagnosis of small-pox. *Med. Standard*, Chicago, 1888, iii, 97-98. [*In his:* C. r., 1882-92, ii, No. 84.]

"The diagnosis of small-pox from varicella is not always easy. In 1885, the Chicago case which conveyed the disease to Montreal, was regarded as varicella and not isolated; an error which was directly responsible for one of the most fatal of modern epidemics."

This article is based on early Montreal experience and refers to his article in the *Canada M. & S. J.*, 1875, as "the fullest discussion in English."

Recovery in cirrhosis of the liver. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 47.

On MacDonnell's case before the Montreal Medico-Chirurgical Society.

Idiopathic dropsy. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 128-129.

Review of article by Wagner, of Leipsic.

Acute rheumatism. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 297-298.

Review of a report of the British Medical Association upon 655 cases from private practice.

Weil's disease. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 382.

Review of article by Fiedler based on thirteen cases in *Med. News.*

Typhoid fever at the Cincinnati Hospital. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 439.

On statistics published in the annual report of this institution.

The relation of heart and kidney affections. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 495.

Da Costa's Middleton-Goldsmith Lecture.

The poisonous effects of petroleum. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 554.

On a careful study made by Lewin (Virchow's *Archiv*), on the oil regions of Pennsylvania and refineries at Point Breeze in Philadelphia. Notes the prevalence of a severe disseminated acne, "observed long ago in the Crimean, Caucasian and Roumanian oil regions, and a similar observation on this subject was made by Harrison Allen in this country more than twenty years ago."

Sudden death in pleurisy and ascites. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 554-555.

The Cartwright lectures on fever. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 578-579.

Delivered by Professor William H. Welch (1888).

Diet in the convalescence of typhoid fever. (Unsigned editorial.) *Med. News*, Phila., 1888, liii, 422.

On a discussion before the Association of American Physicians on the advisability of solid food.

Calomel as a diuretic. (Unsigned editorial.) *Med. News*, Phila., 1888, liii, 593.

Investigations of Stintzing and of Bieganska, confirming Jendrássik's conclusions as to efficacy of the drug.

Liebermeister on the treatment of pneumonia. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 437.

Puerperal anæmia, and its treatment with arsenic. *Boston M. & S. J.*, 1888, cxix, 454-455. *Also, North Car. M. J.*, Wilmington, 1888, xxii, 359-363. *Abstr.: Braithwaite's Retrospect of Medicine*, 1889, xcix, 129. [*In his:* C. r., 1882-92, ii, No. 88.]

A case of local syncope and asphyxia of the fingers. (Case presented at the Philadelphia Neurological Society, Jan. 23, 1888.) Rept. *J. Nerv. & Ment. Dis.*, N. Y., 1888, n. s., xiii, 207-208.

Enlargement and congestion of the right arm following exercise of its muscles. Philadelphia Neurological Society, February 27, 1888.) Rept. *J. Nerv. & Ment. Dis.*, N. Y., 1888, n. s., xiii, 246-248. *Also, Med. News*, Phila., 1888, lii, 330.

Notes and comments: [I. Mental symptoms of chronic Bright's disease; .... III. Treatment of the morphia habit; IV. Use of nitrites in asthma ....] *Canada M. & S. J.*, Montreal, 1887-88, xvi, 316-319.

Notes and comments: [Leprosy in Philadelphia; ....III. Accouchement in a railway closet.] *Canada M. & S. J.*, Montreal, 1887-88, xvi, 375-377.

"An accouchement in a railway closet," was abstracted in *Med. Rec.*, N. Y., xxxiii, 97, and is not the only one of its kind on record.

Notes and comments: I. Chronic gastric ulcer; II. Endocarditis and chorea;....] *Canada M. & S. J.*, Montreal, 1887-1888, xvi, 445-447.

Notes and comments. [I. Death rate from pneumonia; II. Fatal coma after ether anæsthesia. *Canada M. & S. J.*, Montreal, 1887-88, xvi, 508-510.

Notes and comments: [I. Physical signs of aortic aneurysm; .....] *Canada M. & S. J.*, Montreal, 1887-88, xvi, 573-574.

Notes and comments: [I. Purpura rheumatica; II. Rose rash and *tache bleuâtres* (peliomata) in typhoid; III. Gower's "Diseases of the nervous system"; IV. Further note on "An accouchement in a railway closet."] *Canada M. & S. J.*, Montreal, 1887-88, xvi, 732-734.

The *N.Y.M.J.* quotes from a Manitoba paper the doctor who delivered the placenta and the conductor who found the child, about "An accouchement in a railway closet."

(On some forms of paralysis after typhoid fever, by George Ross, Association American Physicians, Sept. 18, 1888.) **Discussion** by Dr. Osler. Rept. *Trans. Assn. Am. Phys.*, 1888, iii, 87.

(The diagnostic significance of the mitral presystolic murmur, by F. Donaldson, Association American Physicians, Sept. 18, 1888.) **Discussion** by Dr. Osler. Rept. *Trans. Assn. Am. Phys.*, 1888, iii, 138.

(Slow pulse, by D. W. Prentiss, Association American Physicians, Sept. 19, 1889.) **Discussion** by Dr. Osler. Rept. *Trans. Assn. Am. Phys.*, 1888, iv, 158.

"I would like to refer to the post-febrile slowing of the pulse which is sometimes seen after typhoid fever. I have recently had such a case in which the pulse fell to thirty-two, and on one occasion to twenty-six per minute."

(Relations between chlorosis, simple anæmia and pernicious anæmia, including leucocythæmia and Hodgkin's disease by Frederick P. Henry, Association American Physicians, Sept. 19, 1888.) **Discussion** by Dr. Osler. Rept. *Tr. Ass. Am. Physicians*, 1888, iv, 184. Also, *Med. Rec.*, N. Y., 1889, xxxvi, 353.

"I have yet to see a case of chlorosis in the male—a distinct, well-marked case."

(The cardiac changes in chronic Bright's disease, by Alfred L. Loomis, Association American Physicians, Sept. 19, 1888.) **Discussion** by Dr. Osler. Rept. *Trans. Assn. Am. Phys.*, 1888, iii, 205.

(Disturbances of the heart rhythm, by G. Baumgarten, Association American Physicians, Sept. 19, 1888.) **Discussion** by Dr. Osler. Rept. *Trans. Assn. Am. Phys.*, 1888, iii, 295.

(Effect of spinal concussion on the reflexes, by F. T. Miles, Association American Physicians, Sept. 20, 1888.) **Discussion** by Dr. Osler. Rept. *Trans. Am. Phys.*, 1888, iii, 295.

Hereditary angio-neurotic œdema. *Am. J. M. Sc.*, Phila., 1888, n.s., xcv, 362-367. *Abstr.: Braithwaite's Retrospect of Medicine*, 1888-98, xcviii, 168-171. [*In his:* C. r., 1882-92, ii, No. 82.]

Presents an interesting study of the heredity of a case, with a genealogical table.

Has the mortality in pneumonia increased? (Signed correspondence.) *Med. Rec.*, N. Y., 1888, xxxiv, 604.

"We need the accurate records of private practice, and, were they available for the past half-century, I believe the mortality under our more rational treatment would show the same striking reduction as is illustrated in the well-known figures which Bennett gives as the result of a change in methods at the Edinburgh Infirmary. I know of but one tolerably extensive series of this kind—that of Dr. Palmer Howard, of Montreal, who treated one hundred and seventy cases, with a mortality of only six and a fraction per cent."

On a form of purpura associated with articular, gastro-intestinal and renal symptoms. *N. York, M. J.*, 1888, xlviii, 675-677. [*In his*: C. r., 1882-92, ii, No. 92.]

Note on a case of Friedreich's ataxia, with exhibition of patient. (Read College Physicians, Philadelphia, Feb. 1, 1888.) *Tr. Coll. Phys.*, Phila., 1888, 3 s., xl, 277-278. (Six illustrations.)

Note on nitro-glycerine in epilepsy. *J. Nerv. & Ment. Dis.*, N. Y., 1888, n. s., xiii, 38-39. *Abstr.*: *The Epitome,* 1888, ix, 117. [*In his*: C. r., 1882-92, ii, No. 83.]

On the diagnosis of duodenal ulcer. *Med. Rec.*, N. Y., 1888, xxxiv, 609-610. [*In his:* C. r., 1882-92, ii, No. 89.]

(Forcible feeding of the insane, by S. Preston Jones, Philadelphia Neurological Society, March 26, 1888.) **Discussion** by Dr. Osler. Rept. *J. Nerv. & Ment. Dis.*, 1888, xv, 334.

(Mortality and treatment of pneumonia, by Henry Hartshorne, College of Physicians, Philadelphia, Feb. 1, 1888.) **Discussion** by Dr. Osler. Rept. *Tr. Coll. Physicians,* Phila., 1888, x, 187-189.

(Epidemic cerebro-spinal meningitis, by C. K. Mills, Philadelphia Neurological Society, March 26, 1888.) **Discussion** by Dr. Osler. Rept. *J. Nerv. & Ment. Dis.*, 1888, xv, 328.

(A subcutaneous connective tissue dystrophy. Patient exhibited by Dr. F. X. Dercum at Philadelphia Neurological Society, Nov. 26, 1888.) **Discussion** by Dr. Osler. Rept. *J. Nerv. & Ment. Dis.*, 1888, xv, 792-793.

Aortic aneurism—hæmorrhage from the lungs. *Phila. M. Times,* 1888-89, xix, 223-224.

The mortality of pneumonia. (Read by title before the 1888 meeting of the Canada Medical Association.) *Univ. M. Mag.*, Phila., 1888-89, i, 77-82. *Rev.: Lancet*, Lond., 1888, ii, 983. *Also, Canada Lancet*, Toronto, 1888-89, xxi, 245. [*In his*: C. r., 1882-92, ii, No. 93.]

Statistics compared of Montreal General Hospital, Pennsylvania Hospital, and New Orleans Charité.

[Abstracts on medicine.] (Under charge of W. Osler, assisted by J. P. Crozier Griffith and Walter Mendelson.) *Am. J. M. Sc.*, 1888, n. s., xcv, 75-80; 182-190; 286-294; 398-410; 511-519; 617-627; n. s., xcvi, 69-78; 178-188; 292-300; 405-413; 514-527; 618-626.

1889

Clinical memoranda; I. Floating kidney; II. The anatomical tubercle. *Montreal M. J.*, 1888-89, xvii, 416-419.

Item II. is listed also under Rubric II. 2, *q. v.*

The mortality of pneumonia. (Unsigned editorial.) *Med. News,* Phila., 1889, lv, 100-101.

On an "admirable paper" by Drs. Townsend and Coolidge presenting an analysis of 1,000 cases of pneumonia treated at the Massachusetts General Hospital from the year 1822 to 1889.

The mortality in pneumonia. *Univ. M. Mag.*, Phila., 1888-89, i, 225.

On the conditions of the brain suitable for operative interference. *Canad. Pract.*, Toronto, 1889, xiv, 165-167. *Abstr.: Univ. M. Mag.*, Phila., 1888-89, i, 465-68.

Treatment of locomotor ataxia by suspension. (Hospital notes. Infirmary for Nervous Diseases of Philadelphia.) *Med. News,* Phila., 1889, liv, 323

On a case of simple idiopathic muscular atrophy, involving the face and scapulo-humeral muscles. *Am. J. M. Sc.*, Phila., 1889, n. s., xcviii, 261-265. [*In his:* C. r., 1882-92, ii, No. 99.]

Patient suffering from spina bifida. (Presented Association American Physicians, Sept. 20, 1889.) *Tr. Ass. Am. Phys.*, 1889, iv, 18.

(On the passage of portal blood into the general circulation, and its probable relations to toxæmia, by Dr. Chas. G. Stockton, American Medical Association, June 25, 1889.) **Discussion** by Dr. Osler. Rept. *Med. Rec.*, N. Y., 1889, xxxv, 711.

Congenital affections of the heart. (7 figs. in the text.) *In:* Cycl. Dis. Child. M. & S. (Keating), Phila., 1889, ii, 747-767.

Idiocy and feeble-mindedness in relation to infantile hemiplegia; a report of twenty-two cases at the Pennsylvania Institution for feeble-minded children. (Read before the Association of Superintendents of Institutions for Feeble-Minded Children. *Alienist & Neurol.*, St. Louis, 1889, x, 16-23.

(The effusion of chyle and of chyle-like, milky, fatty, and oily fluids into the serous cavities, by Samuel C. Busey, fourth annual meeting, Association of American Physicians, Washington, D.C., Sept. 18, 1889.) **Discussion** by Dr. Osler. Rept. *Trans. Assn. Am. Phys.*, 1889, iv, 101-102. *Also, Med. Rec.*, 1889, xxxvi, 352.

[Abstracts in Medicine.] **Under charge of Wm. Osler**, assisted by J. P. Crozier Griffith, and Walter Mendelson. *Am. J. M. Sc.*, 1889, n. s., xcvii, 67-76; 177-185; 284-300; 397-405; 504-513; 611-621; n. s., xcviii, 72-83; 178-193; 287-297; 398-410; 512-521; 610-621.

BALTIMORE PERIOD

(1890-1904)

1890

On the value of Laveran's organisms in the diagnosis of malaria (1889.) *The Johns Hopkins Hosp. Bull.*, Balt., 1889-90, i, 11. [*In his:* C. r., 1882-92, ii, No. 101.]

> "While it may be a little early to ask acceptance of the view that these organisms constitute the specific germ of the disease, the work already done warrants positively the statement that they are peculiar to and diagnostic of the presence of the malarial poison."

Multiple thrombi—multiple gangrene. (Johns Hopkins Hospital Medical Society, Oct. 22, 1889). *Johns Hopkins Hosp. Bull.*, Balt., 1889-90, i, 12.

Fatal hemorrhage into a large bronchocele. (Proc. Johns Hopkins Hospital Medical Society, Nov. 18, 1889.) *Johns Hopkins Hosp. Bull.*, Balt., 1889-90, i, 23.

Congenital heart disease (exhibition of patient, Johns Hopkins Hospital Medical Society, Dec. 2, 1889.) *Johns Hopkins Hosp. Bull.*, Balt., 1889-90, i, 34.

Filaria sanguinis hominis. (Johns Hopkins Hospital Medical Society, Jan. 6, 1890). Rept. *Johns Hopkins Hosp. Bull.*, Balt., 1889-90, i, 48.

> Contains a fine tribute to his colleague, Prof. John Guitéras, of the University of Pennsylvania, with report of a patient who later came under the care of Dr. Osler, at Johns Hopkins Hospital.

On the Amœba coli in dysentery and in dysenteric liver abscess. (Presented at the fifty-eighth annual meeting of the British Medical Association, Birmingham, July 30, 1889. Rept. *Lancet*, 1890, ii, 306.) *Johns Hopkins Hosp. Bull.*, Balt., 1889-90, i, 53-54. *Also, Montreal M. J.*, 1890-91, xix, 54-60. [*In his:* C. r., 1882-92, ii, No. 108.]

Printed under "Selections," but the seven valuable references in the footnotes are omitted.

On fever of hepatic origin, particularly the intermittent pyrexia associated with gall-stones. (Two temperature charts.) (Presented at the fifty-eighth annual meeting of the British Medical Association, Birmingham, July 30, 1889. Rept. *Lancet*, Lond., 1890, ii, 306.) *Johns Hopkins Hosp. Rep.*, Balt., 1890, ii, 3-31.) [*In his:* C. r., 1882-92, ii, No. 102.]

Aortic insufficiency. (Case reported and specimen presented at Johns Hopkins Hospital Medical Society, Oct. 20, 1890.) *Johns Hopkins Hosp. Bull.*, Balt., 1889-90, i, 109.

General bronchiectasis of left lung, fœtid bronchitis; incision of cavity; death. (Case reported and specimen presented at Johns Hopkins Hospital Medical Society, Oct. 20, 1890.) *Johns Hopkins Hosp. Bull.*, Balt., 1889-90, i, 109-110. [*In his:* C. r., 1882-92, ii, No. 115.]

Hereditary chorea. (Johns Hopkins Hospital Medical Society, Oct. 20, 1890.) *Johns Hopkins Hosp. Bull.*, Balt., 1889-90, i, 110. [*In his:* C. r., 1882-92, ii, No. 114.]

On the symptoms of chronic obstruction of the common bile-duct by gallstones. *Ann. Surg.*, St. Louis, 1890, xi, 161-185.

On the form of convulsive tic, associated with coprolalia, etc. (Clinical remarks made to the post-graduate class in medicine, Johns Hopkins Hospital, Baltimore, October 11, 1890.) *Med. News*, Phila., 1890, lvii, 645-647. [*In his:* C. r., 1882-92, ii, No. 109.]

Ueber die in Dysenterie und dysenterischen Leberabscess vorhandene Amœba. *Centralbl. f. Bakteriol. u. Parasitenk.*, Jena., 1890, vii, 736-737.

(**The relation of albuminuria to puerperal eclampsia, by Dr. W. S. Gardner.** Semi-annual meeting Medical and Chirurgical State Faculty of Maryland, Cambridge, Md., Nov. 12, 1890.) **Discussion** by Dr. Osler. Rept. *Med. Rec.*, N. Y., 1890, xxxviii, 616.

Cases of post-febrile insanity. *Johns Hopkins Hosp. Rep.*, Balt., 1890, ii, 46-50. [*In his:* C. r., 1882-92, ii, No. 103.]

Note on endocarditis in phthisis. *Johns Hopkins Hosp. Rep., Balt.*, 1890, ii, 62-64. [*In his:* C. r., 1882-92, ii, No. 105.]

Tubercular peritonitis. General considerations—tubercular abdominal tumors—curability. *Johns Hopkins Hosp. Rep.*, Balt., 1890, ii, 67-113. [*In his:* C. r., 1882-92, ii, No. 106.]

Acute nephritis in typhoid fever. *Johns Hopkins. Hosp. Rep.*, Balt., 1890, ii, 119-128. [*In his:* C. r., 1882-92, ii, No. 107.]

[Abstracts on medicine.] (**Under charge of W. Osler**, assisted by J. P. Crozier Griffith.) *Am. J. M. Sc.*, 1890, n. s., xcix, 73-82; 182-190; 289-299; 397-411; 513-523; 621-631.

1891

Report on the Koch treatment in tuberculosis. *Johns Hopkins Hosp. Bull.*, Balt., 1891, ii, 7-14.

Dr. Osler's first injection of tuberculin was given December 12, 1890.

Hysteria with paroxysmal inspiratory spasm. (Remarks at Johns Hopkins Hospital Medical Society, Nov. 17, 1890.) *Johns Hopkins Hosp. Bull.*, Balt., 1891, ii, 18.

Obstruction of the superior vena cava. (Exhibition of patient before Johns Hopkins Hospital Medical Society, Jan. 5, 1891.) Rept. *Johns Hopkins Hosp. Bull.*, Balt., 1891, ii, 40-41. [*In his:* C. r., 1882-92, ii, No. 116.]

Case of multiple cysticerci. (Presented Johns Hopkins Hospital Medical Society, Feb. 2, 1891.) Rept. *Johns Hopkins Hosp. Bull.*, Balt., 1891, ii, 61. [*In his:* C. r., 1882-92, ii, No. 117.]

The diagnosis of broncho-pneumonia (acute and chronic) from tuberculosis. (Read at the third annual meeting of the American Pediatric Society, Washington, Sept. 22-25, 1891.) Rept. *N. York M. J.*, 1891, liv, 666-667.

Diagnosis of tuberculous broncho-pneumonia in children. (Read at the third session of the American Pediatric Society, Sept. 22-25th, 1891.) *Arch. Pediat.*, Phila., 1891, viii, 825-829. *Also, Tr. Am. Pediat. Soc.*, N. Y., 1892, iii, 25-29. [*In his: C. r.*, 1882-92, No. 112.]

A case of sensory aphasia; word-blindness with hemianopsia. *Am. J. M. Sc.*, Phila., 1891, n. s., ci, 219-224 (two illus.) [*In his:* C. r., 1882-92, ii, No. 110.]

1892

The healing of tuberculosis. (Read before the Medico-Chirurgical Faculty of Medicine, Maryland Session of 1891.) *Climatologist*, Phila., 1892, ii, 149-153. [*In his:* C. r., 1892-97, iii, No. 119.]

Notes on the diagnosis and treatment of cholera. *Med. News*, Phila., 1892, lxi, 290-291.

An acute myxœdematous condition occurring in goitre. (Patient exhibited before Johns Hopkins Hospital Medical Society, Dec. 7, 1891.) *Johns Hopkins Hosp. Bull.*, Balt., 1892, iii, 42.

Chronic cerebro-spinal meningitis. (Patient exhibited before Johns Hopkins Medical Society, Oct. 17, 1892.) *Johns Hopkins Hosp. Bull.*, Balt., 1892, iii, 119.

Localized pyo-pneumothorax. (Johns Hopkins Hospital Medical Society, Oct. 17, 1892.) *Johns Hopkins Hosp. Bull.*, Balt., 1892, iii, 119.

The principles and practice of medicine. Designed for the use of practitioners and students of medicine. New York, 1892, D. Appleton & Co., 1079 p. 8°. *Also*, Edin. & Lond., Young & Pentland; 2nd ed., 1895, 1143 p. 8°; 3rd ed., 1898, 1181 p. 8°; 4th ed.,* 1901, 1182 p. 8°; 5th ed., 1902, 1079 p. 8°; 6th ed., N. Y. & Lond., 1905, D. Appleton & Co., 1143 p. 8°. *Also*, Par., 1908, G. Steinheil, 1230 p. 8° (La pratique de la médecine. Traduction française sur la 6e édition par M. Solomon et Louis Lazard. Préface du Dr. Pierre Marie); 7th ed., N. Y. & Lond., 1909, D. Appleton & Co., 1143 p. 8°. *Also*, Berlin & Wien., 109. Urban & Schwarzenberg, 879 p. 8° (Lehrbuch der innernen Medizin. Aus dem Englischen übersetzt und für deutsche Verhältnisse ergänzt und bearbeitet, von Priv.-Doz. Dr. Edmund Hoke, mit einem Vorwort von Obersanitätsrat und Hofrat Prof. Dr. R. v. Jaksch). *Also*, Shanghai, 1910, Presby. Mis. Press, 8° (Chinese text, transl. of 7th ed. by Philip B. Cousland. (There was also a second Chinese edition); 8th ed. (rev. with the assistance of

* An unauthorized line-for-line reprint of 4th edition (which had not been copyrighted in Great Britain), printed in Edinburgh by Young and Pentland, appeared, (the "pirated edition.") *A. M.*

T. McCrae), N. Y. & Lond., 1912, D. Appleton & Co., 1250 p. 8°. *Also*, N. Y. & Lond., 1918, D. Appleton & Co., 903, 808 p. 8° (Spanish transl.); 9th ed. (thoroughly rev. with T. McCrae), N. Y. & Lond., 1920, D. Appleton & Co., 1168 p. 8°; 10th ed. (rev. by T. McCrae), N. Y. & Lond., 1925. D. Appleton & Co., 1223 p. 8°. [*Rev.* in *Lancet*, Lond., 1925, ii, 869-870.]

This book, now in its tenth edition (1925) gained and maintained a place in English, American, and even continental practice only comparable with that held by the treatise of Sir Thomas Watson (1843) in the decades preceding. The clear, concise, attractive presentation and the many citations from history and the classics, gave it an unique place among scientific books with an essentially literary flavor. A humorous "examination paper" on the recondite literary allusions in Osler's Practice, was published in *St. Thomas' Hospital Gazette*, Lond., 1902, xii, 59, reprinted in *Boston M. & S. J.*, 1902, cxlvi, 449. The book has been translated into French, German, Spanish and Chinese. The outstanding chapters are those on the communicable diseases (in particular typhoid and malarial infections, cholera Asiatica, the pneumonias, syphilis and tuberculosis) and the diseases of the circulatory system, in which Osler's unique knowledge of the pathology of cardiac affections and aneurism is utilized in a most effective way. The classification of diseases afforded in the tables of contents of the successive editions has become a standard source of authoritative reference among bibliographers and librarians. The solitary defect imputed to the book, viz., the slender allotment of dosages and prescriptions in the therapeutic scheme, are evidence of the fact that Osler was, in his own phrase, "a true Asclepiad," in his devotion to the principles of the Coan School, carried over from Hippocrates to Asclepiades: "Treat the patient rather than the disease." *F. H. G.*

The cold-bath treatment of typhoid fever. (A clinical lecture delivered to the graduating class of the Johns Hopkins Hosp., Baltimore, Nov. 9, 1892.) *Med. News*, Phila., 1892, lxi, 628-631. [*In his:* C. r., 1892-97, iii, No. 122.]

On the association of congenital wry-neck, with marked facial asymmetry. (Read before the American Pediatric Society, Washington, Sept. 24, 1891.) *Arch. Pediat.*, N. Y., 1892, ix, 81-85. [*In his:* C. r., 1882-92, ii, No. 120.]

1893

Note on arsenical neuritis following the use of Fowler's solution, (4 oz., 1 drachm, 18 m.) (Read before the Johns Hopkins Medical Society, Feb. 20, 1893.) *Montreal M. J.*, 1892-93, xxi, 721-724. *Also*, quoted in *The Practitioner*, 1893, li, 212-213. [*In his:* C. r., 1892-97, iii, No. 130.]

Note on a remarkable house epidemic of typhoid fever. *Univ. M. Mag.*, Phila., 1892-3, v, 522-524. [*In his:* C. r., 1892-7, iii, No. 131.]

Hirt, Ludwig. The diseases of the nervous system. A text-book for physicians and students. **Translation** with the permission of the author by August Hoch, assisted by Frank R. Smith, with an **introduction** by William Osler, N. Y., 1893. D. Appleton & Co., 698 p. 8°; 2nd ed., 1899.

The introduction is dated, Jan., 1893, and appears unchanged in the second edition.

Organic diseases of the brain. *In:* Text-book Theory & Pract. Med. (Pepper), Phila., 1893, i, 669-725, (four illus. and one colored plate).

Diseases of the nerves. *In:* Text-book Theory & Pract. Med. (Pepper), Phila., 1893, i, 805-849, (three illus. in text).

Diseases of the muscles. *In:* Text-book Theory & Pract. Med. (Pepper), Phila., 1893, i, 850-858, (one figure in text).

Vaso-motor and trophic disorders. *In:* Text-book Theory & Pract. Med. (Pepper), Phila., 1893, i, 859-867, (one tinted insert plate).

THE PRINCIPLES AND

PRACTICE OF MEDICINE

DESIGNED FOR THE USE OF
PRACTITIONERS AND STUDENTS OF MEDICINE

BY

WILLIAM OSLER, M. D.

FELLOW OF THE ROYAL COLLEGE OF PHYSICIANS, LONDON
PROFESSOR OF MEDICINE IN THE JOHNS HOPKINS UNIVERSITY AND
PHYSICIAN-IN-CHIEF TO THE JOHNS HOPKINS HOSPITAL, BALTIMORE
FORMERLY PROFESSOR OF THE INSTITUTES OF MEDICINE, MCGILL UNIVERSITY, MONTREAL
AND PROFESSOR OF CLINICAL MEDICINE
IN THE UNIVERSITY OF PENNSYLVANIA, PHILADELPHIA

NEW YORK
D. APPLETON AND COMPANY
1892

FIG. 6.—Facsimile of title-page of the first edition of Osler's "Practice of Medicine." (Illustrating Rubric III).

Notes on tuberculosis in children. (Read by title before the American Pediatric Society at West Point, N. Y., May, 1893.) *Arch. Pediat.*, N. Y., 1893, x, 979-986. [*In his:* C. r., 1892-7, iii, No. 137.]

On sporadic cretinism in America. (Two figures in text.) (Read before the Association American Physicians, May, 1893.) *Tr. Ass. Am. Phys.*, Phila., 1893, viii, 380-397. *Also, Am. J. M. Sc.*, Phila., 1893, n. s., cvi, 503-518. [*In his:* C. r., 1892-7, iii, No. 136.]

Profound toxemia with slight tuberculous lesions. *Med. News*, Phila., 1893, lxiii, 632-633.

Tuberculous pleurisy. (The Shattuck lecture delivered before the Massachusetts Medical Society, June 13, 1893.) *Boston M. & S. J.*, cxxix, 53-57; 81-85; 109-114; 134-138. *Also, Med. Communicat. Mass. M. Soc.*, Boston, 1893, xvi, 49-112. [*In his:* C. r., 1892-7, iii, No. 133.]

Cases of subphrenic abscess. *Tr. Ass. Am. Physicians*, Phila., 1893, viii, 257-267. *Also, Canad. Pract.*, Toronto, 1893, xviii, 565-574. [*In his:* C. r., 1892-7, iii, No. 132.]

Remarks upon the varieties of chronic chorea, and a report upon two families of the hereditary form, with one autopsy. (Read before the Philadelphia Neurological Society, Nov. 28, 1892.) *J. Nerv. & Ment. Dis.*, N. Y., 1893, xx, 97-111. [*In his:* C. r., 1892-7, iii, No. 129.]

The chronic intermittent fever of endocarditis. *Practitioner*, Lond., 1893, l, 181-190. [*In his:* C. r., 1892-7, iii, No. 128.]

Case of arterio-venous aneurism of the axillary artery and vein of fourteen years' duration. *Ann. Surg.*, Phila., 1893, xvii, 37-40. [*In his:* C. r., 1892-7, iii, No. 127.]

On dilatation of the colon in young children. (Read before the Johns Hopkins Hospital Medical Society, Dec. 19, 1892.) *Arch. Pediat.*, N. Y., 1893, x, 111-119, (one illus.). [*In his:* C. r., 1892-97, iii, No. 125.]

This article is more complete than the following one, which was more of the nature of a presentation of cases.

Cases of dilatation of the colon in young children. (Proc. Johns Hopkins Hospital Medical Society, Jan. 16, 1893.) *Johns Hopkins Hosp. Bull.*, 1893, iv, 41-43.

Tuberculous pericarditis. *Am. J. M. Sc.*, Phila., 1893, n. s. cv, 20-37 (two diagrams). [*In his:* C. r., 1892-7, iii, No. 124.]

1894

I. Parotitis in pneumonia. II. Case of pericarditis treated by incision and drainage. *Univ. M. Mag.*, Phila., 1893-4, vi, 245-247, 248-249. [*In his:* C. r., 1892-7, iii, No. 139.]

Says he performed 105 autopsies on pneumonia at Montreal General Hospital.

The heart in chorea minor. *Med. Chron.*, Manchester, 1894, n. s., i, 321-332. *Also, in his:* "On chorea and choreiform affections," Phila., 1894, [*infra.*]

On chorea and choreiform affections. Phila., 1894, P. Blakiston, Son & Co., 125 p. 8°. [*In his:* C. r., 1892-97, iii, No. 149.]

Diseases of the suprarenal capsules and ductless glands. *In:* Text-book Theory & Pract. Med. (Pepper), Phila., 1894, ii, 234-246, (pl. 1).

Diseases of the blood: Introduction; Primary or essential anæmias, chlorosis and progressive pernicious anæmia; secondary anæmias, including leukæmia; Hodgkin's disease. *In:* Text-book theory & Pract.

Med. (Pepper), Phila., 1894, ii, 182-233. (2 plates, 10 figs.) [*In his:* C. r., 1892-97, iii, No. 135.]

There is a story that he anonymously reviewed one of his articles on the blood—probably this one—severely criticizing himself. His friends were indignant, and endeavored to discover who the reviewer was.

Toxæmia in tuberculosis. *Practitioner*, Lond., 1894, lii, 26-30. [*In his:* C. r., 1892-7, iii, No. 138.]

Clinical remarks on a case of typhoid fever complicated with bronchitis and laryngitis. (Delivered at the Johns Hopkins Hospital, April 11, 1894). *Maryland M. J.*, Balt., 1894, xxxi, 1-3.

Case of hereditary chorea. (Johns Hopkins Hospital Medical Society, Oct. 15, 1894. *Johns Hopkins Hosp. Bull.*, Balt., 1894, v, 119-120.

Pyrexia and its treatment. Remarks made in discussion at sixty-second annual meeting, British Medical Association, Section Medicine, at Bristol, July 31, and Aug. 1, 2 and 3, 1894. Rept. *Brit. M. J.*, Lond., 1894, ii, 1097-1098.

Tuberculosis. *In:* Am. Text-book Dis. Child. (Starr), Phila., 1894, 270-302. 2nd ed., Phila., 1898, 270-302 (one colored plate). [*In his:* C. r., 1892-7, iii, No. 134.]

The diagnosis of abdominal tumours: I. Tumours of the stomach; II. Nodular and massive tumours of the stomach; III. Tumours of the liver: IV. Tumours of the gall-bladder; V. Tumours of the intestine, omentum and pancreas, miscellaneous tumours; VI. Tumours of the kidney. General etiology and symptomatology expanded from articles in *Med. News*, Phila., 1887. (Lectures delivered to the post-graduate class, Johns Hopkins Hospital, Nov. & Dec., 1893.) New York, 1894, D. Appleton & Co., 192 p. 8°, (43 illus.). *Also, N. York M. J.*, 1894, lix, 129-134 (7 figs.); 161-165 (5 figs.); 193-198 (3 figs.); 260-265 (5 figs.); 385-389 (5 figs.); 417-422 (4 figs.); 481-488 (3 figs.); 545-550 (4 figs.); 577-582 (2 figs.): lx, 65-69 (2 figs.); 97-102 (3 figs.). [*In his:* C. r., 1892-7, iii, No. 146.]

These lectures are based on post mortem findings, with histological studies of the specimens, and thus will always have a permanent value for the clinico-pathologist.

On the neurosis following enteric fever, known as "the typhoid spine." *Johns Hopkins Hosp. Rept.*, 1894-5, iv, 73-82. *Also, Am. J. Med. Sc.*, Phila., 1894, n. s., cvii, 23-30. [*In his:* C. r., 1892-7, iii, No. 144.]

Remarks on chills as a cause of error in diagnosis. (Proc. Medico-Chirurgical Faculty of Maryland, Nov. 21-22, 1894.) *Maryland M. J.*, Balt., 1894-5, xxxii, 176-177.

Report on typhoid fever. I. General analysis and summary of the cases. II. Treatment of typhoid fever. III. A study of the fatal cases. IV. Notes on special features, symptoms and complications. *Johns Hopkins Hosp. Rept.*, Balt., 1894-95, iv, 1-72 (charts). [*In his:* C. r., 1892-97, iii, Nos. 140-143.]

Typhoid fever in Baltimore. *Johns Hopkins Hosp. Rept.*, 1894-5, iv, 159-167 (one chart). **[*In his:* C. r., 1892-97, iii, No. 145.]**

Introductory remarks to course of clinical demonstrations on typhoid fever. (Post-graduate course, Johns Hopkins Hospital, October 3, 1894.) ***Maryland M. J.*, Balt., 1894-5, xxxii, 79-82. [*In his:* C. r., 1892-7, iii, No. 151.]**

1895

Cancer of the stomach with very rapid course. *Univ. M. Mag.*, Phila., 1894-5, vii, 248-252. [*In his:* C. r., 1892-7, iii, No. 152.]

Case of sporadic cretinism (infantile myxœdema) treated successfully with thyroid extract. *Arch. Pediat.*, N. Y., 1895, xii, 105-108. [*In his:* C. r., 1892-7, iii, No. 154.]

Hyperpyrexia in typhoid fever. (Rept. Johns Hopkins Hospital Medical Society, Oct. 7, 1895.) *Johns Hopkins Hosp. Bull.*, Balt., 1895, vi, 143-144.

Abscess of the liver, perforating the lung. (Rept. Johns Hopkins Hospital Medical Society, Oct. 7, 1895.) *Johns Hopkins Hosp. Bull.*, Balt., 1895, vi, 144-145.

On the visceral complications of erythema exudativum multiforme. *Am. J. M. Sc.*, Phila., 1895, n. s., cx, 629-646. *In:* Select. essays and monog., Lond., 1897, 321-347, 8°. [*In his:* C. r., 1892-97, iii, No. 163.]

Neuritis during and after typhoid fever. *Johns Hopkins Hosp. Rept.*, Balt., 1895, v, 397-416. [*In his:* C. r., 1892-97, iii, No. 160.]

Diseases, the direct or indirect result of infection: Cerebro-spinal meningitis, tetanus, hydrophobia, tetany, diphtheritic paralysis. *In:* Text-book Nerv. Dis. Am. Authors (Dercum), Phila., 1895, 203-226. [*In his:* C. r., 1892-97, iii, No. 157.]

Studies in typhoid fever: Analysis and summary of the cases; special features, symptoms and complications; a study of the fatal cases. *Johns Hopkins Hosp. Rept.*, Balt., 1895, v, 281; 283; 459. [*In his:* C. r., 1892-97, iii, No. 159.]

Studies in typhoid fever (No. II.): Five years' experience with the cold-bath treatment. *Johns Hopkins Hosp. Rept.*, Balt., 1895, v, 321-326. *Also, Canada M. Rec.*, Montreal, 1895-6, xxiv, 56-60: *Med. News*, Phila., 1895, lxvii, 393-395: *Canada Lancet*, Toronto, 1895-6, xxviii, 261-263. [*In his:* C. r., 1892-97, iii, No. 158.]

The diagnosis of malignant endocarditis. *Phonographic Record.*, Lond., 1894-95, i, 107-109.

Chills in typhoid fever. *Johns Hopkins Hosp. Rept.*, Balt., 1895, v, 445-457. *Also, Univ. M. Mag.*, Phila., 1895-6, viii, 77-85. [*In his:* C. r., 1892-97, iii, No. 161.]

The principles and practice of medicine. Designed for the use of practitioners and students of medicine. 2nd ed. New York, 1895, D. Appleton & Co., 1143 p. 8°.

Visible contractile tumour of the pylorus following ulcer of the stomach. *Montreal M. J.*, 1895-6, xxiv, 81-86. [*In his:* C. r., 1892-7, iii, No. 156.]

Hemiplegia in typhoid fever. (A clinical lecture at the Johns Hopkins Hospital, Dec., 1895.) *J. Nerv. & Ment. Dis.*, N. Y., 1896, n. s., xxi, 295-304. [*In his:* C. r., 1892-7, iii, No. 170.]

1896

The practical value of Laveran's discoveries. *Med. News*, Phila., 1895, lxvii, 561-564. [*In his:* C. r., 1892-97, iii, No. 162.]

Ephemerides, 1895: I. Introduction; II. Heberden's nodes; III. Geographical tongue; IV. Buccal leucoplakia; V. Acute gout in the United States; VI. Calcification of the auricle; VII. Arthritis deformans in childhood; VIII. Unusual types of night-terrors; IX. Tobacco angina; X. Unusually persistent oxyuris; XI. Is the coin sound distinctive of

pneumothorax? XII. Head-swaying in children. *Montreal M. J.*, 1895-6, xxiv, 518-522; 631-635; 694-696; 777-780; 877-880; 969-971.

On six cases of Addison's disease, with the report of a case greatly benefited by the use of the suprarenal extract. *Internat. M. Mag.*, Phila., 1896-7, v, 3-11. [*In his:* C. r., 1892-7, iii, No. 167.]

Hæmorrhage from the bowels in typhoid fever. *Maryland M. J.*, Balt., 1896-7, xxxvi, 73-75.

Pleuro-peritoneal tuberculosis. Exhibition of patient and remarks made at Johns Hopkins Hospital Medical Society, Jan. 20, 1896.) *Johns Hopkins Hosp. Bull.*, Balt., 1896, vii, 79.

Addison's disease. (An address delivered before the classes of the Medico-Chirurgical Society of Philadelphia, Jan. 24, 1896.) *Med. Bull.*, Phila., 1896, xviii, 81-84. [*In his:* C. r., 1892-7, iii, No. 168.]

The study of the fevers of the South. (The address in general medicine, delivered at the forty-seventh annual meeting of the American Medical Association, at Atlanta, Ga., May 5-8, 1896.) *J. Am. M. Assoc.*, Chicago, 1896, xxvi, 999-1004. *Also, Abstr.: Maritime M. News*, Halifax, 1896, viii, 183-186. (*Same as:* **The treatment of fevers.**)

> "....As a strong advocate of hydrotherapy, I take especial pleasure in denouncing as heretics of the worst possible stamp, the advocates of the so-called antiseptic and abortive methods of the treatment of typhoid fever. I would place the man who does not for this purpose also give a purge, in a limbo just a little less hot. . . ."

Lectures on angina pectoris and allied states: I. Introduction; II. Angina pectoris vera—ætiology—general description; III. Angina pectoris vera—phenomena of the attack; IV. (i) Syncope anginosa (ii) The Adams-Stokes syndrome (iii) Angina sine dolore (iv) Cardiac asthma. *N. York M. J.*, 1896, lxiv, 177-183; 249-256; 281-284; 345-350. Republished, with slight additions and corrections, New York, 1897, D. Appleton & Co., 160 p. 8°. (The appendix contains: Note A—Rougnon's claim; Note B—The case of Mr. Matthew Arnold; Note C—Retention of consciousness after apparent cessation of heart's action.) [*In his:* C. r., 1892-97, iii, No. 173.]

The cerebral complications of Raynaud's disease. *Am. J. M. Sc.*, Phila., 1896, n. s., cxii, 522-529. [*In his:* C. r., 1892-7, iii, No. 172.]

Diseases of the blood and ductless glands. *In:* Am. Text-book of Applied Therap. (Wilson), W. B. Saunders, Phila., 1896, 902-927 (1 plate and 3 figs.). [*In his:* C. r., 1892-97, iii, No. 171.]

Case of Addison's disease—death during treatment with the suprarenal extract. (Proc. Johns Hopkins Hospital Medical Society, Oct. 19, 1896.) *Johns Hopkins Hosp. Bull.*, Balt., 1896, vii, 208-209.

A case of diffuse scleroderma, with exhibition of patient. (Medico-Chirurgical Faculty of Maryland, Nov. 10, 1896.) **Remarks** reported *Maryland M. J.*, Balt., 1896-97, xxxvi, 172.

1897

***Mitral stenosis—sudden death—ball thrombus in the left auricle.** (Clinical remarks, Johns Hopkins Hospital, Jan. 13, 1896). *Montreal M. J.*, 1896-7, xxv, 729-731. [*In his:* C. r., 1897-1902, iv, No. 176.]

A clinical lecture on the ball-valve gallstone in the common duct. (Delivered at the Johns Hopkins Hospital, Jan. 22nd, 1897.) *Lancet*, Lond., 1897, i, 1319-1323. [*In his:* C. r., 1897-1902, iv, No. 180.] (Fig. 7.)

*Specimen in the Medical Museum of McGill University.

The disguises of typhoid fever. (Rept. of remarks made at the conference of health officers, held at Baltimore, Feb. 17 and 18, 1897.) *Maryland M. J.*, Balt., 1896-97, xxxvi, 423-425.

These remarks begin with the words "The older we grow, the less we know."

Slow pulse and syncopal attacks. (Correspondence, dated Feb. 12, 1897, on paper by John W. Ogle, entitled "On some cases of unusual and persistent 'slowness' of pulse, presumably dependent upon interference with the intrinsic nerves and ganglia of the heart" in *Lancet*, Lond., 1897, i, 296-298.) *Lancet*, Lond., 1897, i, 623.

Ephemerides, 1897: XIII. Rheumatic neuritis associated with subcutaneous nodules; XIV. Bright's disease or myxœdema; XV. Remarkable noisy expiration in chronic emphysema; XVI. Chills and fever in postpartum anæmia; XVII. Lineæ albicantes; XVIII. Two cases of general bromidrosis; XIX. Vertigo and ocular defects. *Montreal M. J.*, 1896-97, xxv, 642-645; 794-796; 890-893; 952-955.

Ephemerides, 1897: XX. The blood coagulation time in jaundice; XXI. Facial paralysis with herpes zoster; XXII. Paralysis of the ocular muscles in albuminuria. *Montreal M. J.*, 1897-98, xxvii,36-38.

On certain features in the prognosis of pneumonia. *Am. J. M. Sc.*, Phila., 1897, n. s., cxiii, 1-10. *Also, North Car. M. J.*, Wilmington, 1897, xxxix, 295-307. [*In his:* C. r., 1897-1902, iv, No. 175.]

The diagnosis of malarial fever. (Read before the Medical Society of the County of New York, February 22, 1897.) *Med. News*, N. Y., 1897, lxx, 289-292. [*In his:* C. r., 1897-1902, iv, No. 177.]

On certain unusual forms of paræsthetic meralgia. *J. Nerv. & Ment. Dis.*, N. Y., 1897, xxiv, 131-137. [*In his:* C. r., 1897-1902, iv, No. 178.]

A case of leprosy, with exhibition of patient. (Read before the Clinical Society of Maryland, May 28, 1897.) *Maryland M. J.*, Balt., 1897, xxxvii, 417-419.

On the classification of the tics or habit movements. (Read before the American Pediatric Society, Montreal, May 25, 1896.) *Arch. Pediat.*, N. Y., 1897, xiv, 1-5. [*In his:* C. r., 1897-1902, iv, No. 174.]

Hepatic complications of typhoid fever. *Tr. Ass. Am. Physicians*, Phila., 1897, xii, 378-398. *Also, Edinb. M. J.*, 1897, n. s., ii, 423-439. [*In his:* C. r., 1897-1902, iv, No. 184.]

Sporadic cretinism in America. (Abstract of paper read on behalf of the Pediatric Society at its Congress of Physicians and Surgeons, Washington, May, 1897.) *Am. J. M. Sc.*, Phila., 1897, cxiv, 377-401 (25 figs. in text). *Also, Tr. Cong. Am. Phys. & Surg.*, N. Haven., 1897, iv, 169-206 (38 figs. on inserts). [*In his:* C. r., 1897-1902, iv, No. 188.]

Internal secretions considered in their physiological, pathological and clinical aspect.

Relapses in typhoid fever. (Presented in the section on practice of medicine, at the forty-eighth annual meeting of the American Medical Association, held at Philadelphia, June 1-4, 1897.) *J. Am. M. Ass.*, Chicago, 1897, xxix, 97-98.

Tuberculosis. *In:* Amer. Pract. M., Loomis—Thompson, N. Y. & Phila., Phila., 1897, i, 731-848.

Dr. Osler was assisted by Drs. George Blumer and T. B. Futcher in the preparation of this long article.

Malarial fever (Paludism.) *In:* Syst. Med. (Allbutt), N. Y. & Lond., 1897, ii, 721-742.

[Reprinted from THE LANCET, May 15th, 1897.]

A CLINICAL LECTURE

ON

THE BALL-VALVE GALL-STONE IN THE COMMON DUCT.

Delivered at the Johns Hopkins Hospital on January 22nd, 1897,

By WILLIAM OSLER, M. D., F. R. C. P.,
Professor of Medicine at the Johns Hopkins University.

GENTLEMEN,—I will begin this lecture by showing you two interesting specimens. The first consists of the stomach, duodenum, and liver. Even from a distance you can see a nodular projection beneath the mucosa of the duodenum. On closer inspection this is seen to correspond to the papilla biliaria, the orifice of which lies a little to the side of the most prominent part of the projection. This nodular body is a hard, firm mass which can be moved up and down, and as I make it appear at the orifice of the duct you see that it is a rounded, dark gall-stone much too large to escape. On moving it up and down it cannot be passed out of the duodenal portion of the duct, but in this it has considerable play. On examining from the side of the duct the stone is seen to lie in a greatly distended diverticulum of Vater. The common duct is of about the size of my index finger, and the main hepatic ducts are also dilated. The cystic duct is wide, and the gall-bladder is perhaps a little enlarged. It did not at the time of the necropsy contain any stones. The dilated bile-ducts and the gall-bladder contained bile-stained mucus. There was neither

FIG. 7.—Facsimile of title. (Illustrating Rubric III).

1898

Pneumonia. (Review of the cases studied by the third and fourth year classes, Johns Hopkins Hospital, session 1896-7.) *Nat. Med. Rev.*, Wash., 1897-8, vii, 177-180. *Also, J. Pract. Med.*, N. Y., 1897-8, viii, 308-311. [*In his:* C. r., 1897-1902, iv, No. 186.]

Cerebral features of pneumonia. *Maryland M. J.*, Balt., 1897-8, xxxviii, 381-383. [*In his:* C. r., 1897-1902, iv, No. 195.]

I. Spontaneous pneumothorax; II. Aneurism of the abdominal aorta. (Remarks and exhibition of patient at the Clinical Society of Maryland, Feb. 18, 1898.) *Maryland M. J.*, Balt., 1897-8, xxxviii, 461-462; 463.

Ein Fall von Fistula œsophago-pleuro-thoracica. *Arch. f. Verdauungskr.*, Berl., 1897-98, iii, 383-386 (one plate). [*In his:* C. r., 1897-1902, iv, No. 191.]

On chronic symmetrical enlargement of the salivary and lachrymal glands [achroöcytosis]. *Am. J. M. Sc.*, Phila., 1898, cxv, 27-30 (one illus. in text.) [*In his:* C. r., 1897-1902, iv, 189.]

Refers to the second edition of Osler's "Practice", issued in 1895, where he reported such a case as the first of its kind, and then states, "I had overlooked the fact that Mikulicz, in 1892, had described the condition as a characterized form of chronic disease previously unrecognized." This is one of the few instances in which Dr. Osler had to acknowledge an incomplete search of medical literature before publication of a paper.

On some of the intestinal features of typhoid fever. *Phila. M. J.*, 1898, i, 30-32. [*In his:* C. r., 1897-1902, iv, No. 190.]

Leprosy in the United States, with the report of a case. (Clinical lecture delivered at the Johns Hopkins Hospital, Feb. 2, 1898). *Johns Hopkins Hosp. Bull.*, Balt., 1898, ix, 47-49. [*In his:* C. r., 1897-1902, iv, No. 193.]

On diffuse scleroderma: with special reference to diagnosis, and to the use of the thyroid-gland extract. *J. Cutan. & Genitourin. Dis.*, N. Y., 1898, xvi, 49; 127 (one colored plate and 3 figs.). [*In his:* C. r., 1897-1902, iv, No. 194.]

Cerebro-spinal fever. (A clinical lecture on seven cases at the Johns Hopkins Hospital delivered before the post-graduate class June 15, 1898.) *Maryland M. J.*, Balt., 1898, xxxix, 717-723. [*In his:* C. r., 1897-1902, iv, No. 196.]

(The clinical value of enlargement of the spleen.) (**Correspondence** with Robert Turner, M.D., on the latter's paper with this title which appeared in the *Brit. M. J.*, Sept. 24, 1898.) *Brit. M. J.*, Lond., 1898, ii, 1590.

The arthritis of cerebro-spinal fever. (Clinical lecture, Johns Hopkins Hospital, Nov. 9, 1898.) *Boston M. & S. J.*, 1898, cxxxix, 641-643. [*In his:* C. r., 1897-1902, iv, No. 197.]

Tuberculosis. *In:* Am. Text-book Dis. Child. (Starr), 2nd ed., Phila., 1898, 270-302.

The principles and practice of medicine: Designed for the use of practitioners and students of medicine. 3rd ed., New York, 1898, D. Appleton & Co., 1181 p. 8°.

1899

On the study of pneumonia. *St. Paul M. J.*, St. Paul, Minn., 1899, i, 5-9. [*In his:* C. r., 1897-1902, iv, No. 198.]

Though written twenty-five years ago, the following quoted statements are as true to-day as then: "Among diseases there is not one which requires to be more fully and carefully presented than pneumonia—the most common as well as the most serious acute affection of this country, with a mortality exceeding that of all the other acute fevers put together, measles, scarlet fever, diphtheria, whooping-cough, typhoid fever and dysentery."

(A case of hæmochromatosis, by Dr. Opie. Proc. Johns Hopkins Hospital Medical Society, March 20, 1899.) **Discussion** by Dr. Osler. *Johns Hopkins Hosp. Bull.*, Balt., 1899, x, 213.

(Cerebro-spinal meningitis.) (**Remarks** at Clinical Society of Maryland, April 7, 1899.) Rept. *Maryland M. J.*, Balt., 1899, xli, 230-231.

Report of a clinic on cerebro-spinal fever. (Proc. Medico-Chirurgical Faculty of Maryland, April 25, 1899.) **Remarks** reported *Maryland M. J.*, 1899, xli, 291-293.

(**Discussion** of a case of combined typhoid and quartan malarial fevers, by Dr. Craig. Read by Dr. Thayer, in author's absence. Proc. Johns Hopkins Hospital Medical Society.) Rept. *Johns Hopkins Hosp. Bull.*, Balt., 1899, x, 214.

Cases illustrating forms of pigmentation of the skin. *Johns Hopkins Hosp. Bull.*, Balt., 1899, x, 231-232.

The diagnosis of typhoid fever. **Discussion** at the New York State Medical Association, Oct. 25, 1899. *N. York M. J.*, 1899, lxx, 673-676. [*In his:* C. r., 1897-1902, iv, No. 207.]

Clinical remarks on hypertrophic cirrhosis of the liver with bronzing of the skin: hæmochromatosis (two case reports.) (Read in the section of medicine at the annual meeting of the British Medical Association, Portsmouth, Aug. 1-4, 1899.) *Brit. M. J.*, Lond., 1899, ii, 1595-1596. [*In his:* C. r., 1897-1902, iv, No. 208.]

(The preventive and remedial treatment of tuberculosis, by T. Clifford Allbutt at the 67th meeting of the British Medical Association, August 1-4, 1899.) **Discussion** by Dr. Osler. Rept. *Brit. M. J.*, Lond., 1899, ii, 1155.

Chronic splenic enlargement with recurring gastro-intestinal hæmorrhages. *Edinb. M. J.*, 1899, n. s., v, 441-453. [*In his:* C. r., 1897-1902, iv, No. 204.]

Reports three cases, with clinical summaries which were of great interest to Osler in connection with new views about splenic anæmia.

The clinical features of sporadic trichinosis. *Am. J. M. Sc.*, Phila., 1899, n. s., cxvii, 251-265 (two charts.) [*In his:* C. r., 1897-1902, iv, No. 201.]

An acute myxœdematous condition, with tachycardia, glycosuria, melæna, mania and death. (Read at the twenty-fourth annual meeting of the American Neurological Association, May, 1898). *J. Nerv. & Ment. Dis.*, N. Y., 1899, xxvi, 65-71. *Rev.* in *Albany M. Ann.*, 1899, xx, 465-466. [*In his:* C. r., 1897-1902, iv, No. 200.]

On the etiology and diagnosis of cerebro-spinal fever: I. Summary of the features of cerebro-spinal fever as an epidemic; II. Bacteriology of cerebro-spinal fever; III. Diagnosis; IV. Sporadic meningitis; V. Note on treatment. (Cavendish lecture read before the West London Medico-Chirurgical Society, June 16, 1899.) London, 1899, 46 p. 8° (nine charts and two figs. in the text.) *Also, West Lond. M. J.*, Lond., 1899, iv, 145-188: *Boston M. & S. J.*, 1899, cxli, 1-6; 32-38 (no illus.), (from advance sheets courteously furnished by the editor of the *West*

Lond. M. J.): *Brit. M. J.*, Lond., 1899, i, 1517-1529: *Canad. Pract. & Rev.*, Toronto, 1899, xxix, 447-455 (slightly abridged: contains illus.): *Lancet*, Lond., 1899, i, 1699-1709 (includes criticism): *Phila. M. J.*, 1899, iv, 26-41. *Also* referred to in *J. of Nerv. & M. Dis.*, 1899, xxvi. [*In his:* C. r., 1897-1902, iv, No. 205.]

A case of double congenital cystic kidney. (Presented at Johns Hopkins Hospital Medical Society, Jan. 23, 1899.) *Maryland M. J.*, Balt., 1899, xli, 91.

[Clinical diagnosis of typhoid fever.] **Discussion** by Dr. Osler. Rept. *B. M. & S. J.*, 1899, cxli, 526.

1900

On splenic anæmia. *Am. J. M. Sc.*, Phila., 1900, n. s., cxix, 54-73. [*In his:* C. r., 1897-1902, iv, No. 209.]

A case of multiple gangrene in malarial fever. *Johns Hopkins Hosp. Bull.*, Balt., 1900, xi, 41-42. [*In his:* C. r., 1897-1902, iv, No. 211.]

The visceral lesions of the erythema group. *Brit. J. Dermat.*, Lond., 1900, xii, 227-245. *Also, Internat. contrib. med. lit. Festschr. . . . . .Abraham Jacobi*, N. Y., 1900, 446-462. [*In his:* C. r., 1897-1902, iv, No. 213.] (See Fig. 8.)

Hemiplegia in typhoid fever. *Johns Hopkins Hosp. Rep.*, Balt., 1900, viii, 363-371. [*In his:* C. r., 1897-1902, iv, No. 217.]

Hepatic complications of typhoid fever. *Johns Hopkins Hosp. Rep.*, Balt., 1900, viii, 373-383. [*In his:* C. r., 1897-1902, iv, No. 218.]

Analysis and general summary of the cases [of typhoid fever] from 1889-1899. *Johns Hopkins Hosp. Rep.*, Balt., 1900, viii, 421-422. *Also*, under title, **General summary of the cases of typhoid fever treated in the Johns Hopkins Hospital for ten years.** *Phila. M. J.*, 1900, vi, 696-697. [*In his:* C. r., 1897-1902, iv, No. 219.]

Special features, symptoms and complications [of typhoid fever]. *Johns Hopkins Hosp. Rep.*, Balt., 1900, viii, 423-486. [*In his:* C. r., 1897-1902, iv, No. 220.]

Cancer of the stomach: A clinical study. (With T. McCrae.) Phila., 1900, P. Blakiston's Son & Co., 157 p. 8].

Cancer of the stomach in the young. (With T. McCrae.) *N. York M. J.*, 1900, lxxi, 581-585.

A study of the blood in cancer of the stomach. (With T. McCrae.) *N. York M. J.*, 1900, lxxi, 757-761.

Latent cancer of the stomach. (With T. McCrae.) *Phila. M. J.*, 1900, v, 245-247. [*In his:* C. r., 1897-1902, iv, No. 212.]

(Fatal angina pectoris without lesions of the coronary arteries in a young man, by T. E. Bullard.) **Remarks upon the case by William Osler.** *Med. News*, N. Y., 1900, lxxvii, 974-976.

1901

Case of asthma with cyanosis, extensive purpura, painful muscles, and eosinophilia. (Proc. Johns Hopkins Hospital Medical Society, Oct. 15, 1900.) *Johns Hopkins Hosp. Bull.*, Balt., 1901, xii, 17. *Also, Maryland M. J.*, Balt., 1901, xliv, 31.

The medical aspects of carcinoma of the breast, with a note on the spontaneous disappearance of secondary growths. *Am. Med.*, Phila., 1901, i, 17-19; 63-66. [*In his:* C. r., 1897-1902, iv, No. 226.]

Reprinted from the BRITISH JOURNAL OF DERMATOLOGY, *No. 141, Vol. 12.*]

THE

VISCERAL LESIONS

OF

THE ERYTHEMA GROUP.

BY WILLIAM OSLER, M.D., F.R.S.,

Professor of Medicine, Johns Hopkins University.

IN December, 1895,† I published a series of eleven cases characterised by—

I. Polymorphous skin lesions: (*a*) acute circumscribed œdema; (*b*) urticaria; (*c*) purpura; and (*d*) ordinary exudative erythema.

II. Polymorphous visceral lesions: (*a*) local serous or hæmorrhagic exudate in the walls of stomach or bowels, causing (1) crises of pain and (2) hæmorrhages; (*b*) acute nephritis; and (*c*) certain rare pulmonary and other lesions.

III. Infiltration of synovial sheaths, peri-articular tissues, and arthritis.

It would have been better, as some of my dermatological friends suggested, not to have described the cases under the name erythema exudativum multiforme, the term which has been used to designate the so-called pure type of polymorphous erythema, but it was really very difficult to find a name under which to group the cases. Duhring has suggested that the majority of them should be regarded as purpura rather than erythema, but in only Cases 6, 7, and 11 was purpura the sole lesion, while in the remaining cases there was exudate (either serous or hæmorrhagic or both), with swelling.

In the following communication I shall give the subsequent history

* Paper prepared for the Jacobi Festschrift, New York, 1900.

† *American Journal of the Medical Sciences: cf. Brit. Journ. of Dermat.* Vol. VIII., p. 55.

FIG. 8.—"A new clinical entity". Facsimile of title. (Illustrating Rubric III).

On perforation and perforative peritonitis in typhoid fever. *Phila. M. J.*, 1901, vii, 116-119. *Also, St. Louis M. & S. J.*, 1901, lxxx, 254-264. [*In his:* C. r., 1897-1902, iv, No. 222.]

Surgical intervention in perforation in typhoid fever. *Phila. M. J.*, 1901, vii, 138.

Chronic jaundice with xanthoma multiplex. (Proc. Johns Hopkins Hospital Society, Feb. 4, 1901.) *Johns Hopkins Hospital Bull.*, Balt., 1901, xii, 220. *Also, Maryland M. J.*, Balt., 1901, xliv, 126.

On hæmorrhage in chronic jaundice. (Proc. Johns Hopkins Hospital Medical Society, April 1, 1901.) *Johns Hopkins Hosp. Bull.*, Balt., 1901, xii, 264-265.

Hæmorrhage in chronic jaundice. (Correspondence.) *Am. Med.*, Phila., 1901, i, 152.

Typhoid spine. (Proc. Johns Hopkins Hospital Medical Society, April 1, 1901.) *Johns Hopkins Hosp. Bull.*, Balt., 1901, xii, 265.

This is probably the last occasion on which he dwelt particularly on the element of "neurosis" in typhoid spine.

Exhibition of medical cases. (Proc. Johns Hopkins Hospital Medical Society, May 20, 1901.) *Johns Hopkins Hosp. Bull.*, Balt., 1901, xii, 296-298.

(Typhoid fever and typhus fever, by H. Curschmann.) With additions, by William Osler. Authorized transl. from the German under the editorial supervision of A. Stengel, Phila. & Lond., 1901, W. B. Saunders & Co., 646 p. 8°.

Congenital absence of the abdominal muscles, with distended and hypertrophied urinary bladder. *Johns Hopkins Hosp. Bull.*, Balt., 1901, xii, 331-333. [*In his:* C. r., 1897-1902, iv, No. 228.]

A plea for the more careful study of the symptoms of perforation in typhoid fever, with a view to early operation. *Lancet*, Lond., 1901, i, 386-387. [*In his:* C. r., 1897-1902, iv, No. 225.]

On the advantages of a trace of albumin and a few tube casts in the urine of certain men above fifty years of age. *N. York M. J.*, 1901, lxxiv, 949-950. *Also, Indian M. Rec.*, Calcutta, 1902, xxii, 92-93. [*In his:* C. r., 1897-1902, iv, No. 227.]

Sporadic cretinism (infantile and juvenile myxœdema). *In:* Cycl. Dis. Child., M. & S., 2nd ed. (Keating), Phila., 1901, v, 359-371. [*In his:* C. r., 1897-1902, iv, 203.]

On a family form of recurring epistaxis, associated with multiple telangiectases of the skin and mucous membranes. *Johns Hopkins Hosp. Bull.*, Balt., 1901, xii, 333-337. [*In his:* C. r., 1897-1902, iv, No. 229.] (See Fig. 9.)

The spinal form of arthritis deformans. (Remarks introductory to a discussion on the subject.) *Tr. Ass. Am. Physicians*, Phila., 1901, xvi, 687-689.

Cerebro-spinal fever. *In:* Cycl. Dis. Child., M. & S. (Keating). Phila., 1901, v, 1333-1351 (3 figs.).

"It has been found necessary to revise many of the articles and to add some new ones, notably those by Osler on cerebro-spinal fever, etc."

The principles and practice of medicine. Designed for the the use of practitioners and students of medicine. 4. ed., New York, 1901, D. Appleton & Co., 1182 p. 8°.

[From The Johns Hopkins Hospital Bulletin, Vol. XII, No. 128, November, 1901.]

ON A FAMILY FORM OF RECURRING EPISTAXIS, ASSOCIATED WITH MULTIPLE TELANGIECTASES OF THE SKIN AND MUCOUS MEMBRANES.

By William Osler, M. D.,
Professor of Medicine, Johns Hopkins University.

The association here described is rare, as, after a careful [333]
search through the literature, I can find but one reference to a similar case.

An hereditary form of epistaxis has been well described by Babbington.[1]

The association of epistaxis with angiomata of the nasal septum has long been known; but for the associated condition of multiple telangiectases of other mucous membranes and of the skin, I have been able to find only the following report by Rendu.[2] A man, aged 52, whose father had had repeated attacks of melena, and whose mother and brother [334]
had been subject to epistaxis, was admitted in a condition of profound anæmia, having had for three weeks a daily recurrence of epistaxis. He had had his first attacks of bleeding from the nose at the age of twelve, and had been subject to them ever since, particularly in the spring. He had never had any other hæmorrhages. On the skin of the nose, of the cheeks and of the upper lip there were numerous small red spots due to dilatation of superficial vessels of the skin. Similar small telangiectases were seen on the internal surfaces of the lips, the cheeks, the tongue, and on the soft palate. The punctiform angiomas were not seen on the mucous membrane of the nose.

[1] Lancet, 1865, ii, p. 362. [333]
[2] Gaz. des Hôpitaux, 1896, p. 1322.

Fig. 9.—"A new clinical entity." Facsimile of title. (Illustrating Rubric III).

Medical aspects of cancer of the breast. (Read before the Clinical Society of Maryland, Baltimore, April 19, 1901.) *Virginia M. Semi-Month.*, Richmond, 1901-02, vi, 84-86. Rept. with discussion. *Maryland M. J.*, 1901, xlvi, 397-402.

1902

Intermittent claudication. *Montreal M. J.*, 1902, xxxi, 81-86.

Exhibition of medical cases. Primitive splenomegaly with anæmia, cirrhosis of the liver and jaundice—Banti's disease. (Proc. Johns Hopkins Hospital Medical Society, Oct. 7, 1901.) *Johns Hopkins Hosp. Bull.*, Balt., 1902, xiii, 53.

Coma in cancer of the stomach. (Proc. Johns Hopkins Hospital Medical Society, Jan. 6, 1902.) *Johns Hopkins Hosp. Bull.*, Balt., 1902, xiii, 145-146.

Amœbic dysentery. (Remarks at a discussion at the Philadelphia County Medical Society, Philadelphia, March 26, 1902.) *Proc. Phila. Co. M. Soc.*, Phila., 1902, n. s., iv, 44-46. *Also, Therap. Gaz.*, Detroit, 1902, 3. s., xviii, 217-218. [*In his:* C. r., 1902-1907, v, No. 232.]

Hemiplegia in pernicious anæmia. (Proc. Johns Hopkins Hospital Medical Society, April 7, 1902.) *Johns Hopkins Hosp. Bull.*, Balt., 1902, xiii, 251.

The principles and practice of medicine. Designed for the use of practitioners and students of medicine. 5. ed., New York, 1902, D. Appleton & Co., 1079 p. 8°.

On the diagnosis of bilateral cystic kidney. *Am. Med.*, Phila., 1902, iii, 463-464. [*In his:* C. r., 1902-1907, v, No. 230.]

On amœbic abscess of the liver. *Med. News*, N. Y., 1902, lxxx, 673-677. [*In his:* C. r., 1902-1907, v, No. 231.]

Note on the occurrence of ascites in solid abdominal tumors. *Phila. M. J.*, 1902, ix, 928-929. [*In his:* C. r., 1902-1907, v, No. 233.]

This was a very favorite subject. The case which prompted this paper has been seen by many prominent men. No one recognized the solid tumour until Sir William examined it at once after tapping.

Notes on aneurism. *J. Am. M. Ass.*, Chicago, 1902, xxxviii, 1483-1486. [*In his:* C. r., 1902-1907, v, No. 235.]

On heredity in bilateral cystic kidney. *Am. Med.*, Phila., 1902, iii, 951. [*In his:* C. r., 1902-1907, v, No. 236.]

On splenic anæmia. (Second paper.) (Read at the meeting of the Association of American Physicians, Philadelphia, May, 1902.) *Tr. Ass. Am. Physicians*, Phila., 1902, xvii, 429-456. *Also, Am. J. M. Sc.*, Phila., 1902, cxxiv, 751-770. [*In his:* C. r., 1902-07, v, No. 239.]

1903

Case of leukæmia. *Virginia M. Semi-Month.*, Richmond, 1902-03, vii, 540.

Aneurism of the descending thoracic aorta. Phila., 1903, J. B. Lippincott Co., 40 p. 8°. *Also, Internat. Clin.*, Phila., 1903, 13. s., i, 1-40. [*In his:* C. r., 1902-1907, v, No. 242.]

Certain forms of cyanosis with polycythæmia. (Proc. Johns Hopkins Hospital Medical Society, Nov. 17, 1902.) *Johns Hopkins Hosp. Bull.*, Balt., 1903, xiv, 91, *Also, Maryland M. J.*, Balt., 1903, xlvi, 81-82.

A case of chronic purpuric erythema (eight years' duration) with pigmentation of skin and enlargement of liver and spleen. *J. Cutan. Dis.*

Extracted from The American Journal of the Medical Sciences, August, 1903.

CHRONIC CYANOSIS, WITH POLYCYTHÆMIA AND ENLARGED SPLEEN: A NEW CLINICAL ENTITY.

By William Osler, M.D.,
PROFESSOR OF MEDICINE IN JOHNS HOPKINS UNIVERSITY

The group of cases here reported, with those collected from the literature, are worthy of careful study, as we have here in all probability "a definite clinical entity and one which is new to medical science," to use the words of Saundby and Russell in describing their case. The condition is characterized by chronic cyanosis, polycythæmia, and moderate enlargement of the spleen. The chief symptoms have been weakness, prostration, constipation, headache, and vertigo. A further analysis will be reserved until after the consideration of the cases:

Case I. *Cyanosis for years, of unknown origin; albuminuria, rapid pulse; polycythæmia; high vascular tension.*—Dr. K., aged forty-four years, consulted me October 28, 1901, complaining of a rapid pulse and diffuse cyanosis. He has been a very healthy man, active and vigorous, of good habits; has had no serious illnesses. He has been uneasy about himself, as he had detected a trace of albumin in the urine. For several years his wife has noticed that he has had a very congested appearance, and the eyes would often be deeply suffused. I have seen him at intervals for the past five years and have known him to be a very blue-faced man. He has been of a constipated habit. His eyes are somewhat prominent, but his wife says this is natural to him. He has constantly a feeling of fulness in the head, sometimes a sensation of vertigo, and for these symptoms he consulted me.

He was a well-built, well-nourished man; the face much suffused, the ears looked a little blue; the conjunctivæ were injected, and the lips distinctly cyanotic. The tongue also looked cyanotic. The general surface of the skin looked suffused and the anæmia left after pressure of the hand on the skin was very marked and very slowly obliterated. The feet and hands were quite cyanosed. The radials and temporals were moderately sclerotic. Pulse 120, regular. Apex beat in fifth, just inside the nipple line; sounds clear; aortic second a little accentuated. There was no enlargement of the thyroid. No enlargement of the liver; moderate enlargement of the spleen, the edge of which was palpable. The chest was well formed, not barrel-shaped; the cervical muscles not prominent. Expansion of the chest good. No sign of emphysema. Expiration not prolonged. Once or

Fig. 10.—"A new clinical entity." Facsimile of title. (Illustrating Rubric III).

incl. Syph., N. Y., 1903, xxi, 297-302. [*In his:* C. r., 1902-1907, v, No. 244.]

On obliteration of the superior vena cava. *Johns Hopkins Hosp. Bull.*, Balt., 1903, xiv, 169-175. [*In his:* C. r., 1902-1907, v, No. 245.]

On the so-called Stokes-Adams disease (slow pulse with syncopal attacks, etc.) *Lancet*, Lond., 1903, ii, 516-524. [*In his:* C. r., 1902-1907, v, No. 246.]

Two cases of cirrhosis of the liver in children. (Proc. Johns Hopkins Hospital Medical Society, March 16, 1903.) *Johns Hopkins Hosp. Bull.*, Balt., 1903, xiv, 322.

Chronic cyanosis with polycythæmia and enlarged spleen; a new clinical entity. *Am. J. M. Sc.*, Phila., 1903, n. s., cxxvi, 187-201. *Also, Tr. Ass. Am. Physicians*, Phila., 1903, xviii, 299-325. [*In his:* C. r., 1902-1907, v, No. 247.] (See Fig. 10.)

On the visceral manifestations of the erythema group of skin diseases. *Tr. Ass. Am. Physicians*, Phila., 1903, xviii, 599-624. [*In his:* C. r., 1902-1907, v, No. 251.]

Diabetes in infancy. (Correspondence.) *Phila. M. J.*, 1903, xi, 538.

The significance of cutaneous angiomata. *Med. News*, N. Y., 1903, lxxxii, 91.

The varieties of lineæ albicantes. *Med. News*, N. Y., 1903, lxxxiii, 904.

(Congenital hypertrophic stenosis of the pylorus, by H. Beardsley.) **Note by Prof. William Osler.** *Arch. Pediat.*, N. Y., 1903, xx, 355.

Typhoid fever and tuberculosis. *Am. Med.*, Phila., 1903, vi, 1015-1016. [*In his:* C. r., 1902-1907, v, No. 249.]

This paper was prompted by a very sad case. A physician brought his daughter to the hospital thinking she had typhoid fever, when she had advanced pulmonary tuberculosis. *T. McC.*

1904

Ochronosis: the pigmentation of cartilages, sclerotics, and skin in alkaptonuria. *Lancet*, Lond., 1904, i, 10-11. [*In his:* C. r., 1902-1907, v, No. 253.]

On the visceral manifestations of the erythema group of skin diseases. (Third paper.) *Am. J. M. Sc.*, Phila. & N. Y., 1904, n. s., cxxvii, 1-23.

Vasomotor mottling. (Proc. Johns Hopkins Hospital Medical Society, Nov. 16, 1903.) *Johns Hopkins Hosp. Bull.*, Balt., 1904, xv, 66.

Aneurysm of arch of aorta and innominate. (Proc. Johns Hopkins Hospital Medical Society, Nov. 16, 1903.) *Johns Hopkins Hosp. Bull*, Balt., 1904, xv, 66.

On the surgical importance of the visceral crises in the erythema group of skin diseases. *Am. J. M. Sc.*, Phila. & N. Y., 1904, n. s., cxxvii, 751-754. *Also, Johns Hopkins Hosp. Bull.*, Balt., 1904, xv, 259-261. [*In his:* C. r., 1902-1907, v, No. 254.]

Angina pectoris and arterio-sclerosis. *J. Am. M. Ass.*, Chicago, 1904, xliii, 775-776.

Chronic cyanotic polycythæmia with enlarged spleen. *Brit. M. J.*, Lond., 1904, i, 121-122.

Korsakoff's disease. *N. York M. J.*, (etc.), 1904, lxxix, 570.

The treatment of tuberculous pleural effusion and pneumothorax. (Remarks in opening discussion in section of medicine at meeting of British

Medical Association, Oxford, July 26-29, 1904.) *Brit. M. J.*, Lond., 1904, ii, 999-1001.

(Table of comparison between typhus and typhoid fever. By A. Stillé.) **Introductory note** by Professor Osler. *Univ. Penn. M. Bull.*, Phila., 1904-05, xvii, 63-64.

1905

(Diseases of the liver, gall-bladder, and bile-ducts, by H. D. Rolleston. Philadelphia, New York & London. W. B. Saunders & Co., 1905.) **Book review**, signed **E. Y. D.** *Amer. J. Med. Sc.*, 1905, n. s., cxxix, 896-898.

Biliary cirrhosis of family type. (Delivered at Johns Hopkins Hospital Medical Society, Nov. 7, 1904.) Rept. *Johns Hopkins Hosp. Bull.*, Balt., 1905, xvi, 112-113.

Acute tuberculous pneumonia. *Brooklyn M. J.*, 1905, xix, 57-61.

A case of arterio-venous aneurysm of the thigh. (Report to Johns Hopkins Hospital Medical Society, Dec. 19, 1904.) *Johns Hopkins Hosp. Bull.*, Balt., 1905, xvi, 119.

A case of arterio-venous aneurysm. (Exhibition of patient.) (Proc. Johns Hopkins Hospital Medical Society, Jan. 16, 1905.) Rept. *Johns Hopkins Hosp. Bull.*, Balt., 1905, xvi, 146.

The principles and practice of medicine, designed for the use of practitioners and students of medicine. 6. ed., N. Y. & Lond., 1905, D. Appleton & Co., 1143 p. 8°.

(Principles of clinical pathology. A text-book for students and physicians. By Rudolf Krehl. Authorized transl. from the 3rd German ed. by Walter Hewlett.) **Introduction to:** 1st ed. Phila. & Lond., 1905 J. B. Lippincott Co., pp. xiii-xiv. *Also,,* in 2nd ed., 1907: 4th ed., 1917.

The pathology, diagnosis, and treatment of various forms of meningitis. (Remarks in discussion with Sir H. Tooth, et al, at British Medical Association, Leicester, 1905, July 24-28.) Rept. *Brit. M. J.*, Lond., 1905, J. B. Lippincott Co., pp. xiii-xiv.

Aneurism of the abdominal aorta. (Delivered Medico-Chirurgical Society, Montreal.) *Lancet*, Lond., 1905, ii, 1089-1096. [*In his:* C. r., 1902-1907, v, No. 257.]

OXFORD PERIOD

(1905-1919)

1906

Convulsions in typhoid fever. *Practitioner*, Lond., 1906, lxxvi, 1-8. [*In his:* C. r., 1902-1907, v, No. 258.]

(Clinical diagnosis: A text-book of clinical microscopy and clinical chemistry for medical students, laboratory workers, and practitioners of medicine, by Charles Phillips Emerson.) J. B. Lippincott & Co., Phila., & N. Y., 1906, pp. xxvii-xxix.

The medical aspects of carcinoma of the breast. (Address delivered before Leamington Medical Society.) *Brit. M. J.*, Lond., 1906, i, 1-4. [*In his:* C. r., 1902-1907, v, No. 259.]

Angina pectoris as an early symptom in aneurysm of the aorta. *Med. Chron.*, Manchester, 1906, xliv, 69-79. [*In his:* C. r., 1902-1907, v, No. 260.]

1907

On multiple hereditary telangiectases with recurring hæmorrhages, (1907.) *Quart. J. Med.*, Oxford, 1907-08, i, 53-58. [*In his:* C. r., 1907-1920, vi, No. 268.]

Splenic polcythæmia with cyanosis. (Remarks in discussion, Dec. 13, 1907.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1907-08, i, Clin. Sect., 41-42.

Case showing unusual situation of gouty deposit, in the olecranon bursa. (Remarks in discussion, Dec. 13, 1907.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1907-08, i, Clin. Sect., 54.

A clinical lecture on abdominal tumors associated with disease of the testicle. (Radcliffe Infirmary, Oxford, March 20, 1907.) *Lancet*, Lond., 1907, i, 1409-1412. [*In his:* C. r., 1907-1920, vi, No. 266.]

The indications for operation in cases of intracranial tumour. (Remarks in discussion at British Medical Association, Exeter, July 31, 1907.) Rept. *Lancet*, Lond., 1907, ii, 334.

Cerebro-spinal fever. (Address to students in Edinburgh, Feb. 8, 1907.) *Edin. M. J.*, 1907, n. s., xxi, 199-204. [*In his:* C. r., 1907-1920, vi, No. 264.]

On telangiectasis circumscripta universalis. *Johns Hopkins Hosp. Bull.*, Balt., 1907, xviii, 401-403. [*In his:* C. r., 1907-1920 ,vi, No. 269.]

The diagnosis of acute pancreatitis. (Remarks in discussion, British Medical Association, Exeter, July 27 to Aug. 2, 1907.) Rept. *Brit. M. J.*, Lond., 1907, ii, 1132-1135.

Early diagnosis of cancer of the stomach. (Remarks in discussion, Bath & British Branch, British Medical Association, Bath, Feb. 27, 1907.) *Brit. M. J.*, Lond., 1907, i, 746.

Syphilis, (with J. W. Churchman.) *In:* Modern Medicine. (Osler & McCrae), Phila. & N. Y., 1907, iii, 436-521. *Also,* 2. ed., 1914, ii, 144-215. [*In his:* C. r., 1907-1920, vi, No. 281.]

The clinical features of ochronosis. *Quart. J. Med.*, Oxford, 1907-8, i, 202-204. [*In his:* C. r., 1907-1920, vi, No. 271.]

1908

La pratique de la médecine. Traduction française sur la 6 me. édition par M. Salomon et Louis Lazard. Préface du Dr. Pierre Marie. Par., 1908, G. Steinheil, 1230 p. 8°.

Pneumococcus infections. (Remarks in discussion at Medical Society London, Dec. 9, 1907.) Rept. *Tr. Med. Soc.*, Lond., 1908, xxxi, 93-100; 114-117. *Also,* (slightly abridged) *Clin. J.*, Lond., 1907-08, xxxi, 295-301, *Lancet*, Lond., 1907, ii, 1683-1684: *Brit. M. J.*, Lond., 1907, ii, 1713-1714.

Acute endocarditis. *In:* Modern Medicine. (Osler & McCrae), Phila. & N. Y., 1908, iv, 133-150. *Also,* 2. ed., 1915, iv, 148-165. [*In his:* C. r., 1907-1920, vi, No. 275.]

Diseases of the valves of the heart. (With A. G. Gibson.) *In:* Modern Medicine. (Osler & McCrae), Phila. & N. Y., 1908, iv, 205-269. 2nd ed. v. iv, 1915, 212-274. [*In his:* C. r., 1907-1920, vi, No. 275.]

Diseases of the arteries. *In:* Modern Medicine. (Osler & McCrae), Phila. & N. Y., 1908, iv, 426-447; 2nd ed., 1915, iv, 449-471. [*In his:* C. r., 1907-1920, vi, No. 275.]

Aneurysm. *In:* Modern Medicine. (Osler & McCrae). Phila. & N. Y., 1908, iv, 448-502. *Also*, 2. ed., 1915, iv, 472-525. [*In his:* C. r., 1907-1920, vi, No. 275.]

A clinical lecture on erythræmia (polycythæmia with cyanosis, maladie de Vaquez.) (Radcliffe Infirmary, Oxford, Nov. 28, 1907.) *Lancet*, Lond., 1908, i, 143-146. [*In his:* C. r., 1907-1920, vi, No. 272.]

Splenic enlargements other than leukæmic. (Delivered at meeting of British Medical Association, Sheffield, July 24-31, 1908.) *Brit. M. J.*, Lond., 1908, ii, 1151-1154.

Historical note on hereditary chorea. *Neurographs*, Brooklyn, 1908, i, 113-116.

A case of Hodgkin's disease with general eosinophilia. *Lancet*, Lond., 1908, i, 1226. (Unsigned annotations of paper by O. H. Perry Pepper in *Bull. Ayer Clin. Lab. Penn. Hosp.*, Dec., 1907, No. iv, 22.

Endocardites infectieuses chroniques. *Bull. et mém. Soc. méd. d. hôp. de Par.*, 1908, 3. s., xxv, 794-796. *Also, Tribune Méd.*, Par., 1908, n. s., xl, 773. [*In his:* C. r., 1907-1920, vi, No. 274.]

1909

The principles and practice of medicine, designed for the use of practitioners and students of medicine. 7. ed., N. Y. & Lond., 1909, D. Appleton & Co., 1143 p. 8°.

Raynaud's disease. *In:* Modern Medicine. (Osler & McCrae), Phila. & N. Y., 1909, vi, 625-647. *Also*, 2. ed., 1915, iv, 975-997. [*In his:* C. r., 1907-1920, vi, No. 279.]

Diffuse scleroderma; erythomelalgia. *In:* Modern Medicine. (Osler & McCrae), Phila. & N. Y., 1909, vi, 665-682. *Also*, 2. ed., 1915, iv, 1014-1031. [*In his:* C. r., 1907-1920, vi, No. 279.]

Angioneurotic œdema; Quincke's disease. In: Modern Medicine. (Osler & McCrae), Phila. & N. Y., 1909, vi, 648-664. *Also*, 2. ed., 1915, iv, 998-1013. [*In his:* C. r., 1907-1920, vi, No. 279.]

Visceral syphilis. (With Alexander G. Gibson.) *In:* Syst. Syph. (Power & Murphy), Lond., 1909, Henry Frowde, Oxford University Press, iii, 1-80.

Paralysis of the left recurrent laryngeal nerve in mitral-valve disease. *Montreal M. J.*, 1909, xxxviii, 79-83. *Also*, **(De la paralysie du nerf récurrent gauche dans les affections mitrales)**, *Arch. d. Mal du coeur* (etc.), Par., 1909, ii, 73-76. [*In his:* C. r., 1907-1920, vi, No. 277.]

Angina pectoris. (Remarks in discussion, British Medical Association, Belfast, July 23-30, 1909. Rept. *Brit. M. J.*, Lond., 1909, ii, 1128.

(Pneumococcus invasion of the throat, followed by pleuropneumonia and appendicitis; operation and recovery, by W. E. Peacock.) **Note** by Professor Osler. *Brit. M. J.*, Lond., 1909, ii, 1274.

Note on the relation of the capillary blood-vessels in purpura. *Lancet*, Lond., 1909, i, 1385-1386.

The treatment of disease. (The address in medicine before the Ontario Medical Association, Toronto, June 3, 1909.) Lond., 1909, H. Frowde, 26 p. 8°. *Also, Brit. M. J.*, Lond., 1909, ii, 185-189: *Canada Lancet*, Toronto, 1908-09, xlii, 899-912. Republished, (with slight changes), *Oxford Med.*, 1919, i. 695-708. [*In his:* C. r., 1907-20, vi, No. 282.]

Schorstein lecture on syphilis and aneurysm. *Brit. M. J.*, Lond., 1909, ii, 1509-1514.

Stokes-Adams disease. (With A. Keith.) *Syst. Med.*, (Allbutt & Rolleston), Lond., 1909, vi, 130-156. [*In his:* C. r., 1907-1920, vi, No. 291.]

Aneurysm. *In:* Syst. Med. (Allbutt & Rolleston), Lond., vi, 620-681. [*In his:* C. r., 1909-20, vi, 291A.]

Chronic infectious endocarditis. *Quart. J. Med.*, Oxford, 1908-9, ii, 219-230. *Also, Tribune Med.*, N. Y., 1909, i, v, 29-30. [*In his:* C. r., 1907-1920, vi, No. 278.] (See Fig. II.)

Arterio-sclerosis. (**Address** delivered before the Medical Society of London, Dec. 9, 1907, also before Oxford and Reading Branch, Oxford Division, British Medical Association, Dec. 8, 1909.) Rept. *Brit. M. J.*, Lond., 1909, ii, 1800.

Lehrbuch der inneren Medizin. Aus dem Englishen übersetzt und für deutsche Verhältnisse ergänzt und bearbeitet, von Priv.-Doz. Dr. Edmund Hoke, mit einem Vorwort von Obersanitätsrat und Hofrat Prof. Dr. R. v. Jaksch. Berlin & Wien., 1909, Urban & Schwarzenberg, 879 pp. 8°.

1910

A case of stricture of the rectum treated by fibrolysin. (Remarks in **discussion**, Jan. 14, 1910.) *Proc. Roy. Soc. Med.*, Lond., 1909-10, iii, Clinical Section, 89.

A case of thoracoplasty for very large empyema. (Remarks in **discussion**, Jan. 14, 1910.) *Proc. Roy. Soc. Med.*, Lond., 1909-10, iii, Clinical Section, 92.

A paper on hospital infection of tuberculosis. (Remarks in **discussion**, April 26, 1910.) *Proc. Roy. Soc. Med.*, Lond., 1909-10, iii, Medical Section, 159.

Certain vasomotor, sensory and muscular phenomena associated with cervical rib. *Am. J. M. Sc.*, Phila. & N. Y., 1910, cxxxix, 469-472. [*In his:* C. r., 1907-1920, vi, No. 290.]

Female hæmophiliacs and de novo cases of hæmophilia. (Correspondence, April 25, 1910, signed.) *Lancet*, Lond., 1910, i, 1226.

The Lumleian lectures on angina pectoris. (Delivered at the Royal College Phyicians, London, March 10-15, 1910.) *Lancet*, Lond., 1910, i, 702-844; 973-977. *Abstr.:* **Ueber angina pectoris**, *Allg. Wien. med. Ztg.*, 1910, lv, 435-436. [*In his:* C. r., 1907-1920, vi, No. 288.]

The pupil symptoms in thoracic aneurysm. (A clinical lecture, Radcliffe Infirmary.) *Practitioner*, Lond., 1910, lxxxiv, 417-422. [*In his:* C. r., 1907-1920, vi, No. 289.]

The principles and practice of medicine, transl. by Philip B. Cousland. 7. ed. (Chinese text, illustrated, and material introduced from Sir Patrick Manson's Tropical Diseases). Shanghai, 1910, China Medical Missionary Association, printed by the Fukuin Printing Co. Ltd., Yokohama, Japan, 8°, xxxii, preliminary matter, 1079 pages and 1 page at end of Chinese characters.

> "The publication committee is under special obligation to Prof. Osler for his hearty concurrence in this endeavour to give his book to the Chinese in their own language."

CHRONIC INFECTIOUS ENDOCARDITIS

By WILLIAM OSLER[1]

An endocarditis with fever as its only symptom may be prolonged for weeks or months under many different circumstances. Following rheumatic fever in a child an endocardial complication may keep up a temperature of from 100° to 101° for several months, during which time there may be no other symptoms and the general condition may remain fairly good. In chronic valvular disease in the stage of broken compensation slight irregular fever may persist for months, associated with the presence of fresh endocarditis. As a rule, the form of endocarditis to which we give the term infective, septic, or ulcerative runs its course under three months. That occasional instances were characterized by a very protracted course was noted by Wilks, Bristowe, Coupland, and Lancereaux. In my Goulstonian Lectures 1885, I stated that this type had the following characteristics: the fever was irregular and intermittent, resembling ague; the cold, hot, and sweating stages might succeed each other with great regularity; in the intervals fever might be absent; two or three paroxysms could occur in the course of a day. In many of the instances the disease was prolonged to three or four months, and I give the notes of a case of Bristowe's, in which the condition persisted for five months. The recurring chills usually led to the diagnosis of malaria and also gave rise to the opinion widely held, particularly by French writers, that ulcerative endocarditis could be caused by this disease. The cases to which I wish to call attention in this communication are of this chronic character, not marked specially by chills, but by a protracted fever, often not very high but from four to twelve months' duration. At the time of the delivery of the Goulstonian Lectures I had not seen a case of this type. In the past twenty years I have seen ten cases of this form, two of which I have already reported (*Practitioner*, 1893). I have put them together in tabular form to indicate their main features.

[1] Read at the Association of Physicians of Great Britain and Ireland, Edinburgh, June 12, 1908.

(Q. J. M., Jan. 1909.)

FIG. 11.—Facsimile of title of one of Osler's most important contributions in the field of clinical medicine. (Rubric III).

1911

(Vascular diseases of the skin and their relation to other morbid states.) Remarks in discussion of a paper at British Medical Association, Birmingham, July 21-22, 1911. *Brit. M. J.*, Lond., 1911, ii, 820.

Transient attacks of aphasia and paralysis in states of high blood pressure and arterio-sclerosis. *Canad. M. Ass. J.*, Toronto, 1911, i, 919-926. [*In his:* C. r., 1907- 1920, vi, No. 296.]

The diagnosis of fever without physical signs. Remarks in discussion at British Medical Association, Birmingham, July 21-28, 1911.) Rept. *Brit. M. J.*, Lond., 1911, ii, 799-800.

Treatment of consumption and other forms of tuberculosis. (Introductory address at the annual conference, Caxton Hall, Westminster, July 19-21, 1911). *Tr. Nat. Ass. Prev. Consumption*, Lond., 1911, iii, 119-123.

> "We hope to-day to give an answer, satisfactory if not in full, to the exceeding bitter cry that goes up from the five hundred thousands of our brothers and sisters with tuberculosis—'What must I do to be saved?' We still lack one great thing in the treatment of tuberculosis —a specific in the treatment of the disease.....But we have not yet got—we may yet get—an agent that will play the torpedo to the bacillus; what Huxley called the torpedo method in therapeutics...."

Sulle telangiectasie emorragiche ereditarie. *Riforma med.*, Napoli, 1911. xxvii, 57-58. [*In his:* C. r., 1907-1920, vi, No. 294.]

1912

(A case of ligation of the innominate artery for subclavian aneurism. By C. A. Ballance.) (Remarks in discussion, Dec. 8, 1911.) *Proc. Roy. Soc. Med.*, Lond., 1911-12, v, Clin. Sect., 103.

(A case of primary chancre of the lip.) (Remarks in discussion, Jan. 12, 1912.) *Proc. Roy Soc. Med.*, Lond., 1911-12, v, Clinical Section, 109.

(A case of tumour below the right hypochondrium (?) Riedel's lobe. Remarks in discussion, Jan. 12, 1912.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1911-12, v, Clinical Section, 111.

(The relative value of immediate and delayed laparotomy in pneumococcal peritonitis. By Hector Charles Cameron.) (Remarks in discussion, Jan. 12, 1912.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1911-12, v, Clinical Section, 135.

(A case of recurrent aphasia with high blood pressure. By F. Parkes Weber.) (Remarks in discussion, Jan. 12, 1912.) *Proc. Roy. Soc. Med.*, Lond., 1911-12, v, Clin. Sect., 113.

(Anomalous œdema. By Frederick Langmead.) (Remarks in discussion, Feb. 9, 1912.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1911-12, v, Clinical Section, 142.

(Osteitis deformans (Paget's bone disease), with chronic eczema.) (Remarks in discussion, Feb. 9, 1912.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1911-12, v, Clinical Section, 143.

(A case of Hirschsprung's disease: congenital dilatation of the colon. By Hector Mackenzie and W. H. Battle.) (Remarks in discussion, Feb. 9, 1912.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1911-12, v, Clinical Section, 148.

(A case of thoracic aneurism not connected with aorta. By Frederick Langmead.) (Remarks in discussion, May 31, 1912.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1911-12, v, Clinical Section, 197.

(Sclerema cutis (adultorum.) By James Galloway, M.D., (Remarks in discussion, May 31 and Nov. 8, 1912.) Rept. *Proc. Roy. Soc. Med.*, Lond., Clin. Sec., 1911-12, v, 205; 1912-13, vi, 44.

The principles and practice of medicine. 8. ed., rev. with the assistance of Thomas McCrae. N. Y. & Lond., 1912. D. Appleton & Co., 1225 p. 8°.

Angina abdominis. (Letters dated Oxford, May 24, 1912, signed.) *Lancet*, Lond., 1912, i, 1495.

> "A feature in some of these cases (disguised heart disease) to which I called attention in my Lumleian lectures, 1910, is the association of jaundice with abdominal pains leading to the diagnosis of gall-stones. In one of my cases an operation was performed but no stones were found."

The after-care of children leaving hospital. (Letter quoted.) *The Times*, Lond., 1912, March 11, 6.

Chronic infectious endocarditis, with an early history like splenic anæmia. (Clinical remarks at Radcliffe Infirmary, Oct. 24, 1911.) *Interstate M. J.*, St. Louis, 1912, xix, 103-107.

High blood pressure. Its associations, advantages and disadvantages. (Delivered at the Glasgow Southern Medical Society.) *Brit. M. J.*, Lond., 1912, ii, 1173-1177. [*In his:* C. r., 1907-1920, vi, No. 299.]

Cerebral angiospasm. (Correspondence, Nov. 17, 1912, signed.) *Lancet*, Lond., 1912, ii, 1463.

> The M.S. of this dated Oxford, May 17, 1912, is found in Part 2 of Sir William Osler's copy of the first edition of his Practice of Medicine at p. 669. *A. M.*

1913

(Arteriovenous anastomosis for gangrene due to syphilitic endarteritis. By H. Morriston Davies.) (Remarks in discussion, Oct. 11, 1912.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1912-13, vi, Clinical Section, 6.

Case of Hirschsprung's disease. By R. Hutchison, M.D. (Report of discussions, Nov. 8 and Dec. 13, 1912. *Proc. Roy. Soc. Med.*, Lond., 1912-13, vi, Part I, Clin. Sect., 45-46; 62.

Case illustrating circulatory disturbance with cervical rib. (Presented Royal Society Medicine, October 11, 1912.) *Proc. Roy. Soc. Med.*, Lond., 1912-13, vi, Clinical Section, 9-12.

(Case of acholuric jaundice (hæmolytic anæmia, by W. Essex Wynter.) (Remarks in discussions, Nov. 8, 1912, and Jan. 10, 1913.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1912-13, vi, Clinical Section, 35; 81.

(A case of obstruction of the superior vena cava. By A. M. Gossage.) (Remarks in discussion, Dec. 13, 1912.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1912-13, vi, Clinical Section, 49.

(Cervical ribs with atrophy of hand muscles. By F. Parkes Weber.) (Remarks in discussion, Dec. 13, 1912.) Rept. *Proc. Roy. Soc. Med.*, 1912-13, vi, Clinical Section, 57.

(Non-syphilitic arteritis obliterans (thrombo-angeitis of Leo Buerger) with intermittent claudication of the left lower extremity. By F. Parkes Weber.) Remarks in discussion, Jan. 10, 1913.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1912-13, vi, Clinical Section, 78.

(Case of polio-encephalo-myelitis associated with optic neuritis, nephritis and myocarditis. By Arthur F. Hurst and W. Johnson.) (Remarks

in discussion, Jan. 10, 1913.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1912-13, vi, Clinical Section, 92.

Typhoid spine. (Letter, July 7, signed.) *Brit. M. J.*, Lond., 1913, ii, 100.

Cervical Rib. (Letter signed, Oxford, Jan. 28, 1913.) *Brit. M. J.*, 1913, I, 261. *Also, Lancet*, Lond., 1913, i, 345.

Congenital syphilis of the liver with the picture of Banti's disease. (Communication to the Royal Society Medicine, October 28, 1913.) *Proc. Roy. Soc. Med.*, Lond., 1913-14, vii, Section of Medicine, 1-6. *Also, Brit. M. J.*, Lond., 1913, ii, 1228. *Also*, Rept. *Clin. J.*, Lond., 1914, xliii, 462-464. [*In his:* C. r., 1907-1920, vi, No. 300.]

An arterio-venous aneurysm of the axillary vessels of thirty years' duration. *Lancet*, Lond., 1913, ii, 1248-1249.

1914

Splenomegaly: two attacks of hæmatemesis; irregular liver. (Case presented Feb. 13, 1914, for E. J. F. Hardenberg.) *Proc. Roy. Soc. Med.*, Lond., 1913-14, vii, Clinical Section, 108.

The visceral lesions of purpura and allied conditions. *Brit. M. J.*, 1914, i, 517-525. [*In his:* C. r., 1907-1920, vi, No. 305.]

[Address on the diagnosis of early pulmonary tuberculosis.] Delivered Oxford and Reading Branch of the British Medical Association meeting at the Radcliffe Infirmary, Oxford, March 14, 1913. Rept. *Brit. M. J.*, Lond., 1914, i, 710.

1915

(An instance of long quiescence in leukæmia. By Arthur T. Hall). (Remarks in discussion by W. Osler, F. Parkes Weber, and others, April 27, 1915.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1914-15, viii, Section of Medicine, 31.

The diagnosis of polycystic kidney. (Remarks at Radcliffe Infirmary, Oxford, November 23, 1914.) *Internat. Clin.*, Phila., 1915, 25, s., i, 1-5. [*In his:* C. r., 1907-1920, vi, No. 308.]

Note on acute infectious jaundice. (Unsigned.) *Lancet*, Lond., 1915, ii, 605.

1916

Discussion on trench nephritis. (Remarks in discussion, Feb. 15, 1916.) Rept. *Proc. Roy Soc. Med.*, Lond., 1915-16, ix, Therap. & Pharmacol. Sect., xiv-xvii.

Paratyphoid fever. (Remarks in discussion, Nov. 23, 1915.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1915-16, ix, Medical Section, 38.

Discussion on the treatment of cerebro-spinal meningitis. (Opened by Sir William Osler, Oct. 19, 1915.) *Proc. Roy Soc. Med.*, Lond., 1915-16, ix, Therap. & Pharmacol., Sect., 1-5. Rept. *Brit. M. J.*, *Lond.*, 1915, ii, 604. *Also, Lancet*, Lond., 1915, ii, 823.

Treatment of cerebro-spinal meningitis. (With H. D. Rolleston et al.) *Practitioner*, Lond., 1916, xcvi, 1-18.

This is the address which opened the discussion listed above reviewed and enlarged.

1917

Recurrence or redeposit of cancer. (Correspondence, signed.) *Brit. M. J.*, Lond., 1917, i, 455.

Home-bred malaria. (Correspondence, Oct. 13, 1917, signed.) *Lancet*, Lond., 1917, ii, 621.

1918

Graduated exercises in prognosis. (Letters, signed, Oxford, Feb. 4, 1918.) *Lancet*, Lond., 1918, i, 231.

Tratado de patologia interna para médicos y estudiantes. 2 v., New York & Lond., 1918, D. Appleton & Co., 903; 808 p. 8°.

Typhoid spine. (Clinical remarks at Canadian General Hospital, Clivedon, Taplow, Jan. 7, 1919.) *Bull. Can. Army M. Corps*, 1918, i, 78-79. *Also, Canada, M. Ass. J.*, Toronto, 1919, ix, 490-496. [*In his:* C. r., 1907-1920, vi, No. 321.]

Trench fever: a critical analysis of the report of the American Commission. *Lancet*, Lond., 1918, ii, 496-498.

1919

Observations on the severe anæmias of pregnancy and post-partum state. *Brit. M. J.*, Lond., 1919, i, 1-3. [*In his:* C. r., 1907-1920, vi, No. 322.]

Endurance in aortic insufficiency. (Correspondence, Jan. 5, 1919, signed.) *Brit. M. J.*, Lond., 1919, l, 55.

Acute pneumonic tuberculosis. (Address at Tuberculosis Society, March 24, 1919.) *Abstr.: Lancet*, Lond., 1919, i, 615-616.

1920

Osler, Sir W., & McCrae, T., **The principles and practice of medicine.** 9. thoroughly rev. ed., N. Y. & Lond., 1920, D. Appleton & Co., 1168 p. 8°.

---

* **Abstracts in Medicine.** *Am. J. M. Sci., 1895-1911.* As stated on page 523 of this rubric Osler had charge of this department in the *American Journal of Medical Sciences* from April, 1886, until April, 1890, and again from 1895 to 1911. The paging in the latter years, which is not given above, is as follows:—

William Osler and George Dock: 1895, cix, 459-465; 567-576; 698-704; cx, 94-103; 219-227; 339-347; 467-473; 599-606. 1896, cxi, 93-99; 221-228; 346-356; 471-479; 726-735; cxii, 90-98; 218-229; 339-347; 472-479; 595-600; 711-715. 1897, cxiii, 111-115; 213-220; 341-348; 473-481; 593-599; 727-733; cxiv, 101-106; 221-227; 343-349; 466-474; 713-716. 1898, cxv, 89-95; 211-216; 337-344; 463-468; 590-598; 721-728; cxvi, 97-102; 225-229; 344-348; 465-471; 601-606; 715-720. 1899, cxvii, 87-91; 211-218; 339-344; 457-464; 595-601; 709-715; cxviii, 209-215; 343-348; 463-470; 595-601; 721-725. 1900, cxix, 89-94; 211-217; 339-344; 457-464; 585-590; 715-721; cxx, 85-92; 211-218; 337-343; 476-481; 603-607; 703-709. 1901, cxxi, 97-105; 221-227; 337-343; 451-458; 585-592; 707-713.

William Osler and W. S. Thayer: 1901, cxxii, 93-99; 212-219; 332-338; 466-475; 687-694; 875-879. 1902, cxxiii, 163-168; 341-347; 531-536; 703-711; 902-910; 1089-1092; cxxiv, 154-159; 345-349; 532-537; 727-731; 908-913; 1087-1090. 1903, cxxv, 157-160; 343-347; 531-535; 718-722; 911-916; 1101-1108; cxxvi, 169-171; 337-341; 530-535; 729-731; 917-923; 1085-1089. 1904, cxxvii, 159-161; 343-347; 542-546; 722-726; 907-910; 1087-1090; cxxviii, 166-170; 347-351; 539-541; 729-733; 922-925; 1087-1090. 1905, cxxix, 154-159; 348-352; 530-535; 719-722; 901-905; 1080-1085; cxxx, 158-162; 344-347; 529-533; 721-723; 917-919; 1097-1099. 1906, cxxxi, 159-162; 345-348; 548-551; 713-717; 897-900; 1079-1083; cxxxii, 136-142; 309-313; 473-476; 627-630; 777-782; 927-929. 1907, cxxxiii, 151-155; 317-322; 471-476; 627-632; 783-788; 927-934; cxxxiv, 129-134; 283-288; 439-444; 595-601; 751-755; 903-906. 1908, cxxxv, 127-133; 283-288; 439-444; 597-601; 751-756; 897-903; cxxxvi, 129-133; 283-288; 443-447; 594-598; 753-754; 895-900. 1909, cxxxvii, 127-132; 283-288; 439-445; 595-600; 751-756; 901-905; cxxxviii, 127-132; 283-288; 439-444; 595-599; 475-756; 899-903. 1910, cxxxix, 127-132; 283-288; 439-444; 597-602; 753-758; 905-913; cxl, 126-133; 283-289; 439-445; 595-600; 751-757; 897-903. 1911, cxli, 126-132; 283-288; 439-444; 599-604; 750-756; 899-901; cxlii, 128-134.

IV.—LITERARY PAPERS, HISTORY, BIOGRAPHY, BIBLIOGRAPHY

CANADIAN PERIOD

(1869-1884)

1877

Report on necrology. *Tr. Canada Med. Ass.*, 1877, i, 77-79.

Contains obituaries of James Hamilton, L.R.C.S., and others.

James Hamilton, L.R.C.S., Edin. (Unsigned obituary.) *Canada M. & S. J.*, Montreal, 1876-77, v, 478-480. *Also*, (with slight additions) in Canniff, (Wm.): *The Medical Profession in Upper Canada, 1783-1850.* Toronto, Wm. Briggs, 1894, 410-412.

1878

Edward Mulberry Hodder, M.D., F.R.C.S., Eng. (Unsigned obituary.) *Canada M. & S. J.*, Montreal, 1877-78, vi, 428-431.

1880

Chas. F. A. Locke, M.D., C.M. (Unsigned obituary.) *Canada M. & S. J.*, Montreal, 1879-80, viii, 379-381.

James Bovell, M.D. (Unsigned obituary.) *Canada M. & S. J.*, Montreal, 1879-80, viii, 381.

James Bovell, M.D. (Unsigned editorial.) *Canad. J. M. Sc.*, Toronto, 1880, v, 114-115.

Gives a detailed biography.

1881

Rudolph Virchow. (Unsigned editorial.) *Canada M. & S. J.*, Montreal, 1881-82, x, 253-255.

An enthusiastic biographical sketch inspired by the occasion of Virchow's sixtieth birthday.

1883

Sir Thos. Watson, Bart., M.D., F.R.S. (Unsigned editorial.) *Canad. Pract.*, Toronto, 1883, viii, 54-55.

Dr. John Brown's spare hours. (Unsigned book review.) *Med. News*, Phila., 1883, xliii, 273.

A review of the American edition of Dr. Brown's Locke and Sydenham with other occasional papers in the *Horæ Subsecivæ* (bye-hours), published in Edinburgh in 1858.

PHILADELPHIA PERIOD

(1885-1889)

1885

[Authorship of "Lines on a skeleton" or "To a skeleton".] (Signed letter from Philadelphia dated, January 3, 1885, with editorial comment on letter.) *Boston M. & S. J.*, 1885, cxii, 69.

States that this poem commencing: "Behold this ruin! 'Twas a skull," attributed in a recent issue, in an obituary notice, to Professor Darling, was published in 1807, so that "the secret of this beautiful poem remains unrevealed." The editor replies that the two poems are "probably not identical."

Pasteur on hydrophobia. (Unsigned editorial.) *Med. News,* Phila., 1885, xlvii, 544.

On Pasteur's announcement, first at the Copenhagen Congress, and then at the Paris Academy of Medicine, of his cure for rabies.

Rush as an alienist. (Unsigned editorial.) *Med. News,* Phila., 1885, xlvii, 601-602.

A review of Dr. Hack Tuke's appreciative sketch of Rush's pioneer work in psychiatry.

1886

The death of Dr. Flint, [Sr.]. (Unsigned editorial.) *Med. News,* Phila., 1886, xlviii, 324.

Austin Flint. Remarks to the class in clinical medicine, University of Pennsylvania. (Obituary address.) *Canada M. & S. J.,* Montreal, 1885-86, xiv, 571-574.

[Death of Paul Bert.] (Unsigned editorial.) *Med. News,* Phila., 1886, xlix, 579.

Obituary note of Claude Bernard's most prominent pupil, a noted politician and publicist in France.

An interesting work. (Unsigned editorial.) *Med. News,* Phila., 1886, xlix, 709.

Donation to the Library of the College of Physicians of "a splendid edition of Morgagni's *de Sedibus et Causis Morborum,* given by the illustrious Morgagni to Dr. John Morgan, the founder of the Medical Department of the University of Pennsylvania, on the occasion of his visit to Padua. Dr. Rush is responsible for the statement that Morgagni claimed kindred with Dr. Morgan on account of the resemblance of their names, and says that on a blank leaf of a copy of the work he inscribed the words, '*Affini suo, medico præclarissimo Joanni Morgan donat Auctor*'. The faint tracings of writing are still discernible on the thumb-worn fragments of the fly-leaf of the volume, but it has become illegible and we owe our knowledge to the note made of it by Dr. Rush before it became faded and defaced."

Harvey's manuscript notes. (Unsigned editorial.) *Med. News,* Phila., 1887, l, 15-16.

A review of the publication by the Royal College of Physicians of London, of the original manuscript of 1616, which antedates, by twelve years, the publication of Harvey's celebrated work, "*De Motu Cordis.*"

The centennial of the College of Physicians of Philadelphia. (Unsigned editorial.) *Med. News,* Phila., 1887, l, 43.

An historical survey of the foundation of this society, its medical genealogy, its affiliations with Fothergill, its rare bibliographic treasures.

1887

[Virchow in German politics.] (Unsigned editorial.) *Med. News,* Phila., 1887, l, 161.

A monument to Rush. (Unsigned editorial.) *Med. News,* Phila., 1887, l, 440.

In support of an appeal issued by the American Medical Association to the profession of America for $40,000 to erect a monument to Rush, which now stands at Washington, D.C.

1888

Notes and comments: [....II. Autobiography of the late Samuel D. Gross, by his sons; ....V. Robert Louis Stevenson's dedication of "Underwoods" to "the medical profession."] *Canada M. & S. J.,* Montreal, 1887-88, xvi, 317-320.

(For items I., III. and IV., see under Rubric III.)

Notes and comments: [....II. Autobiography of Charles Darwin....] *Canada M. & S. J.,* Montreal, 1887-88, xvi, 376.

(For other items see Rubric III.)

Notes and comments: [III....Thoughts on dying; IV. Obituary of Richard Zimmerman of the Toronto School of Medicine. *Canada M. & S. J.,* Montreal, 1887-88, xvi, 510-511.

(For other items see also under Rubric III.)

Notes and comments: [....II. Report of Prof. Winckel of Munich on his visit to McGill University; III. The death of Prof. Wagner of Leipzig.] *Canada M. & S. J.,* Montreal, 1887-88, xvi, 574-575.

Death of Professor Wagner. (Unsigned editorial.) *Med. News,* Phila., 1888, lii, 268-269.

Obituary of a great pathologist and clinician who "as a teacher of medicine had scarcely an equal in Europe."

[The death of Miss Alice Fisher.] (Unsigned editorial.) *Med. News,* Phila., 1888, lii, 642.

A sympathetic note on this heroic graduate of the Florence Nightingale School at St. Thomas' Hospital "who nearly four years ago was appointed by the Board of Guardians to take charge of the Training School for Nurses at the Philadelphia Hospital."

1889

[Death of Dr. Palmer Howard of Canada.] (Unsigned editorial note.) *Med. News,* Phila., 1889, liv, 383.

Robert Palmer Howard, M.D. (Unsigned obituary.) *Med. News,* Phila., 1889, liv, 419.

This article is of great interest, because it gives, at first hand, Osler's own impression of the man who, as Dean of the McGill Medical Faculty and Professor of Medicine during his undergraduate years, and later as his warm personal friend and supporter, exercised a profound influence over his life and educational development.

Dr. Samuel W. Gross. (Unsigned editorial.) *Med. News,* Phila., 1889, liv, 440.

On his death, on April 16th, 1889.

Samuel W. Gross, M.D., (Unsigned obituary.) *Med. News,* Phila., 1889, liv, 474-476.

BALTIMORE PERIOD

(1890-1904)

1890

Weir Mitchell. (Remarks on the occasion of the presentation to the College of Physicians of Philadelphia, of the portrait of Dr. S. Weir Mitchell, April 22, 1890.) *Johns Hopkins Hosp. Bull.*, Balt., 1889-90, i, 64.

1891

Rudolf Virchow: the man and the student. (Address made at the celebration of Virchow's seventieth birthday, at Johns Hopkins University, Baltimore, Oct. 31, 1891.) *Boston M. & S. J.*, 1891, cxxv, 425-427. *Also, Johns Hopkins Univ. Circ.*, Balt., 1891, xi, 17-19. [*In his:* C. r., 1882-92, ii, No. 111.]

A note on the introduction of aspiration for pleurisy. (Read at the Johns Hopkins Historical Club, Feb. 9, 1891.) *Statement in: Johns Hopkins Hosp. Bull.*, Balt., 1891, ii, 65. (Not published).

Richard Lea MacDonnell. (Unsigned obituary.) *N. York M. J.*, 1891 liv, 162.

1893

Physic and physicians as depicted in Plato. (Read at the Johns Hopkins Hospital Historical Club, Dec. 14, 1892.) *Boston M. & S. J.*, 1893, cxxviii, 129-133; 153-156. [*In his:* C. r., 1892-97, iii, No. 126.]

Jean Martin Charcot, memorial notice. *Johns Hopkins Hosp. Bull.*, Balt., 1893, iv, 87-88.

Gives a most effective summary of Charcot's achievement, comparable with those recently published in connection with the centenary of his birth, (Nov. 25, 1925.) *F. H. G.*

1894

Oliver Wendell Holmes. (Remarks made at the Johns Hopkins Medical Society, Oct. 15, 1894.) *Johns Hopkins Hosp. Bull.*, Balt., 1894, v, 85-88. [*In his:* C. r., 1892-97, iii, No. 150.]

1896

Thomas Dover, M.B. (of Dover's powder), physician and buccaneer. Baltimore, Friedenwald Co., 1896, 18 p., 12°. *Also, Johns Hopkins Hosp. Bull.*, Balt., 1896, vii, 1-6: *Lancet*, Lond., 1896, i, 4-7. [*In his:* C. r., 1892-97, iii, No. 165.]

In the London *Lancet* this has the sub-title, "A contribution to medical history."

An Alabama student. (Read before the Johns Hopkins Hospital Historical Club, Jan., 1895.) Baltimore: Friedenwald Co., 1896, 19 p., 12°. *Also, Johns Hopkins Hosp. Bull.*, Balt., 1896, vii, 6-11. *Also,* in *An Alabama student and other biographical essays,* 1908, Oxford Univ. Press, 334 p. 8°. Extract under title **John Y. Bassett** (1805-1851) in *American Medical Biographies* by Kelly & Burrage, 1920, pp. 71-72. [*In his:* C. r., 1892-1897, iii, No. 166.]

John Keats, the apothecary poet. (Read before the Johns Hopkins Hospital Historical Club, Oct. 29, 1895. Baltimore: Friedenwald Co., 1896, 18 pp., 12°. *Also, Johns Hopkins Hosp. Bull.*, Balt., 1896, vii, 11-16. *Extract:* **Keats and the medical profession.** (Letter from Baltimore dated Dec. 24, 1895.) *Brit. M. J.*, Lond., 1896, i, 115. [*In his:* C. r., 1892-97, iii, No. 164.]

The original title is of an essay before the Historical Club on the occasion of the one hundredth anniversary of the birth of the poet. In it, he quotes from Forman's new edition of Keats' letters.

Influence of Louis on American medicine. (Read before the Stillé Society of the Medical Department of the University of Pennsylvania, undated.) *Johns Hopkins Hosp. Bull.*, Balt., 1897, viii, 161-167. [*In his:* C. r., 1897-1902, iv, No. 182.]

1897

Occasional notes on American medical classics: introductory lecture to a course of clinical observations in the Pennsylvania Hospital, delivered there on the 3rd of December, 1776, by Dr. Thomas Bond. (Read at a meeting of the Johns Hopkins Hospital Historical Society). *Univ. M. Mag.*, Phila., 1897-98, x, 136-140. [*In his:* C. r., 1897-1902, iv, No. 187.]

1899

In memoriam, William Pepper. *Phila. M. J.*, 1899, iii, 607-611. [*In his:* C. r., 1897-1902, iv, No. 202.]

This address was prepared to be delivered at the opening of the session of the Johns Hopkins Medical School, October, 1898; but Dr. Osler was ill at the time.

William Pepper. (Remarks at the Mahogany Tree Club, Philadelphia, Nov. 15, 1898.)

150 copies privately printed. *A. M.*

1900

Elisha Bartlett, a Rhode Island philosopher. (An address delivered before the Rhode Island Medical Society, Providence, Dec. 7, 1899.) With an appendix containing Dr. Bartlett's sketch of Hippocrates. Providence: Snow & Furnham, 1900, 43 pp., 8°. *Also, Boston M. & S. J.*, 1900, cxlii, 49; 77: *Tr. Rhode Island M. S.*, Providence, 1899-1903, vi, 15-46. *Quoted, Cycl. Am. M. Biography* (Kelly), Phila., & Lond., 1912, i, 50-52: *Am. M. Biographies*, (Kelly & Burrage), Balt., 1920, 71-72. [*In his:* C. r., 1897-1902, iv, No. 215.]

John Locke as a physician. (Address delivered before the Students' Societies of the Medical Department of the University of Pennsylvania, Jan. 16, 1900.) *Lancet*, Lond., 1900, ii, 1115-1123. [*In his:* C. r., 1897-1902, iv, No. 216.]

The centenary of the Royal College of Surgeons. (Correspondence initialled.) *Maryland M. J.*, Balt., 1900, xliii, 502-522.

Date of the centenary celebration was July 25, 1900.

1901

Books and men. (Remarks at the opening of the new building of the Boston Medical Library, Jan. 12, 1901.) *Boston M. & S. J.*, 1901, cxliv, 60-61. [*In his:* C. r., 1897-1902, iv, No. 223.]

The past century: its progress in great subjects. Medicine. *The Sun*, N. Y., 1901, Jan. 27. *Also*, (under title "**The progress of medicine in the nineteenth century**"), *Progr. Cent.* (Wallace), New York & Lond., 1901, 173-214, 8°. (Under title "**Medicine in the nineteenth century**"), in *Æquanimitas, with other addresses to medical students, nurses and practitioners of medicine*, Phila., 1904, 2nd ed., 1906, P. Blakiston's Son & Co., pp. 221-276. [*In his:* C. r., 1897-1902, iv, No. 224.]

RELIGIO MEDICI

AN ADDRESS DELIVERED AT GUY'S HOSPITAL

OCTOBER, 1905

BY

WILLIAM OSLER, M.D., F.R.S.

REGIUS PROFESSOR OF MEDICINE, OXFORD

Reprinted from THE LIBRARY, *January*, 1906

LONDON

PRINTED AT THE CHISWICK PRESS

1906

FIG. 12.—Facsimile of title page of the address published also under the title "Sir Thomas Browne." (Illustrating Rubric IV.)

Linacre Lecture, 1908
St John's College, Cambridge

THOMAS LINACRE

by

WILLIAM OSLER, M.D., F.R.S.
REGIUS PROFESSOR OF MEDICINE IN THE
UNIVERSITY OF OXFORD

CAMBRIDGE:
at the University Press
1908

FIG. 13.—Facsimile of title page of an address published in book form. (Illustrating Rubric IV.)

1902

Some aspects of American medical bibliography. (Address at the meeting of the Association of Medical Librarians, Saratoga, June 10, 1902.) *Bull. Ass. M. Librar.*, Balt., 1902, i, 19-32. *Also, Am. Med.*, Phila., 1902, iv, 424-427. [*In his:* C. r., 1902-1907, v, No. 237.]

A visit to the Hunterian Library at Glasgow. *Bull. Ass. M. Librar.*, Balt., 1902, i, 20-23.

Alfred Stillé (1813-1900). *Univ. Penn. Med. Bull.*, Phila., 1902, xv, 126-132. *Abstr.* in Cycl. Am. Med. Biography (Kelly), Phila. & Lond., 1912. *Also,* in American Med. Biographies (Kelly & Burrage), Baltimore, 1920, 1106-1107. [*In his:* C. r., 1902-1907, v, No. 234.]

[**Speech** at complimentary dinner to Dr. Sternberg.] This was a reply to an address by F. H. Garrison, *Med. News,* Phila., 1902, lxxx, 1197. *In:* George Miller Sternberg. A biography by his wife. Chicago, 1920, Amer. M. Ass., 240-241.

William Beaumont. A pioneer American physiologist. An address before the St. Louis Medical Society, Oct. 4, 1902. St. Louis, 1902, 29 p., 8°. *Also, J. Am. M. Ass.*, Chicago, 1902, xxxix, 1223-1231. [*In his:* C. r., 1902-1907, v, No. 240.] Reprinted as: **A backwoods physiologist.** *In:* An Alabama Student, N. Y., 1908, 159-188.

1904

The "Phthisiologia" of Richard Morton, M.D. *Med. Libr. & Hist. J.*, Brooklyn, 1904, ii, 1-7. [*In his:* C. r., 1902-1907, v, No. 252.]

[Remarks at the unveiling of the memorial tablet to Dr. Jesse W. Lazear.] *Johns Hopkins Hosp. Bull.*, Balt., 1904, xv, 387-388.

Science and immortality. The Ingersoll Lecture, 1904. Boston, 1904, Houghton, Mifflin & Co., 60 p. 12°. *Also,* Lond., 1904, Constable & Co., 96 p. 12°. 2nd ed., 1906, Lond., Constable & Co., 96 p. 12°. 3rd ed., Lond., 1918, 96 p. 12°.

OXFORD PERIOD

(1905-1919)

1905

Counsels and ideals from the writings of William Osler. **Extracts,** selected edited, and published by C. N. B. Camac, Houghton, Mifflin Co., 1905, 277 pp. 12°. 2. ed., London: Oxford Univ. Press. 1921, 355 pp. 8°.

Sir Thomas Browne. (Address delivered before the Physical Society, Guy's Hospital, Lond., Oct. 12, 1905.) *Brit. M. J.*, Lond., 1905, ii, 993-998. *Also,* (under title **Religio Medici**), *Library,* Lond., 1906, vii, 1-31: Chiswick Press, Lond., 31 p. 8° (reprinted from Library). *Also,* in **An Alabama student and other biographical essays,** Oxford University Press, Henry Frowde, 1908, 248-277. [*In his* C. r., 1902-1907, v, No. 261.] (Fig. 12.)

1906

John Radcliffe. The first possessor of the "Gold-headed cane". (Presented, The Johns Hopkins Hospital Historical Club, Jan. 29, 1906.) *Johns Hopkins Hosp. Bull.*, Balt., 1906, xvii, 163-165.

Fracastorius. *Proc. Charaka Club,* N. Y., 1906, ii, 5-20. *Also,* in **An Alabama student and other biographical essays,** Oxford, 1908, pp. 278-294. [*In his:* C. r., 1902-1907, v, No. 263.]

(Osler at the tomb of Louis, by A. C. Klebs.) *J. Am. M. Ass.*, Chicago, 1906, xlvi, 1716.

Contains Osler's remarks on Louis.

John Bruce MacCallum, B.A., M.D. (Unsigned obituary.) *Brit. M. J.*, Lond., 1906, i, 955-956.

The growth of truth as illustrated in the discovery of the circulation of the blood. (Harveian oration delivered at the Royal College of Physicians, London, October 18, 1906.) London: H. Frowde, 1906, 44 pp. 8°. *Also, Brit. M. J.*, Lond., 1906, ii, 1077-1084: *Lancet*, Lond., 1906, ii, 1113-1120: *Boston M. & S. J.*, 1906, clv, 491-502: In *An Alabama Student*, N. Y., 1908, 295-334. [*In his:* C. r., 1902-1907, v, No. 262.]

This is identical with his **Harvey and his discovery.**

1907

The evolution of internal medicine. *In:* Modern medicine, etc. (Introduction). (Osler & McCrae), Phila. & N. Y., 1907, i, xv-xxxiv. [*In his:* C. r., 1907-20, vi, No. 280.]

The historical development and relative value of laboratory and clinical methods in diagnosis: The evolution of the idea of experiment in medicine. *Tr. Cong. Am. Phys. & Surg.*, N. Haven, 1907, vii, 1-8. [*In his:* C. r., 1907-1920, vi, No. 270]

Dr. Mary Putnam Jacobi. (An address at meeting held at Academy of Medicine, New York, Jan. 4, 1907. Rept. *N. Y. Med. Rec.*, Jan. 12, 1907, p. 66.) In: In Memoriam of Mary Putnam Jacobi, New York, 1907, 3-8.

This address was delivered at a meeting called for the purpose of raising $25,000 to establish a travelling fellowship for a woman.

Sir William Hales Hingston, M.D., LL.D., D.C.L., F.R.C.S., Eng. (Unsigned obituary.) *Lancet*, Lond., 1907, i, 770.

The reserves of life. (Address delivered at St. Mary's Hospital, London, Oct. 2, 1907.) *St. Mary's Hosp. Gaz.*, Lond., 1907, xiii, 95-98.

1908

Thomas Linacre. Cambridge University Press, 1908, 64 pp., 11 pl., 12°. (See Fig. 13.)

1909

(Tuberculosis. A treatise by American authors on the etiology, pathology, frequency, semeiology, diagnosis, prognosis, prevention and treatment. Edited by A. C. Klebs.) **Historical introduction**, by Dr. Osler. New York & London: D. Appleton & Co., 1909, 939 pp., 8°.

Michael Servetus. (Address delivered before the Johns Hopkins Historical Club, and also as an extension lecture in the summer session course.) London, Henry Frowde, Oxford University Press, 1909, 35 pp. (with plates), 8°. *Also, Johns Hopkins Hosp. Bull.*, 1910, xxi, 1-11: *Deutsche Rev.*, Stuttg. u. Leipz., 1909, iv, 328-347. [*In his:* C. r., 1907-20, vi, No. 284.] (**Michael Servetus ein Märtyrer der Wissenschaft.**) [*In his:* C. r., 1907-20, vi, No. 285.]

Gui Patin's 'Jugement' on the 'Religio Medici.' *Athenaeum*, 1909, (March), 347.

The article concludes with a long quotation in old French from the collection of Latin letters in the Bibliothèque Nationale. It will be remembered that the Religio Medici is No. 7 in Osler's Bedside Library for Medical Students.

Appreciation of Sir Stephen Mackenzie, M.D., F.R.C.P. (Obituary.) *Brit. M. J.*, Lond., 1909, ii, 733.

[**Inaugural lecture** on the history of medicine. Delivered before the York Medical Society, Nov. 2, 1909.] Rept. *Brit. M. J.*, Lond., 1909, ii, 1370. *Also, Yorkshire Herald*, Nov. 3, 1909 p. 8.

The library of Robert Burton. (Summary of a paper read before the Bibliographical Society, London, Nov. 15, 1909.) *Tr. Bibliographical Soc. for 1909-11,* Lond., 1912, xi, 4-7.

Giving an account of Burton's books now in the Bodleian and Christ Church Libraries. "It is hoped that this [paper] may be presented separately later on with lists of Burton's books at Bodleian Library and at Christ Church. Meanwhile the usual summary is here printed."

1910

(History of medicine, by Max Neuburger. Translation, by Ernest Playfair. London: H. Frowde; Hodder & Stoughton, 1910, vol. i.) **Preface,** by Dr. Osler.

The faith that heals. *Brit. M. J.,* 1910, i, 1470-1472.

(The work of Dr. Carlos J. Finlay in respect of insect-borne disease.) (**Correspondence,** signed.) *Lancet,* Lond., 1910, i, 1716.

(A letter to the *Lancet,* signed by Juan Guiteras, calling attention to the fact that Dr. Osler in an address before the London School of Tropical Medicine had omitted Dr. Finlay's name in the discussion of new discoveries concerning the transmission of diseases by blood-sucking insects, with **reply** by Dr. Osler.)

Appreciation of Joseph Frank Payne. (Unsigned obituary.) *Brit. M. J.,* Lond., 1910, ii, 1751.

Edward L. Trudeau: an appreciation. *J. Outdoor Life,* N. Y., 1910, vii, 162-163.

In memoriam. Dr. John Hewetson, 1867-1910. (Initialled obituary.) *Johns Hopkins Hosp. Bull.,* Balt., 1910, xxi, 357. [*In his:* C. r., 1907-20, vi, 292.]

Man's redemption of man. (A lay sermon, McEwan Hall, Edinburgh, Sunday, July 2, 1910.) London: Constable & Co., 1910, 60 pp. 24°, 2. ed., 1913, 63 pp. 24°, 3. ed., 1918, 64 pp. 24°. *Also, Am. Mag.,* N. Y., 1910-11, lxxi, 246-252: New York: P. B. Hoeber, 1913, 63 pp. 24°.

Dr. William H. Welch. *Am. Mag.,* N. Y., 1910, lxx, 456; 457; 459. *Also,* Lord Baltimore Press, p. 12.

An appreciation, written for the occasion of the Welch dinner held at the Hotel Belvedere, Baltimore, April 22, 1910.

Greek at Oxford. (Letter from Oxford dated Nov. 23, 1910.) *Nation,* N. Y., 1910, xci, 544-545. *Also, The Evening Post,* N. Y., 1910, Dec. 10, p. 12 (book section).

1911

(The Life of Pasteur, by René Vallory-Radot.) **Foreword** by Dr. Osler. London: Constable & Co., 1911, 2 vols., pp. ix-xx; 2. ed., 1919, 1 vol., pp. v-xvi. [*In his:* C. r., 1907-20, vi, No. 298.]

[**Address** before the International Association of Antiquarian Booksellers at the Criterion Restaurant, Piccadilly, Jan. 26, 1911.] *The Bookseller,* Lond., Feb. 3, 1911, p. 144.

Maeterlinck on death. (Letter to the editor of the "Spectator" signed as from Christ Church.) *The Spectator,* Lond., Nov. 4, 1911, cvii, 740.

(Republished in full in Cushing's Life of Osler.)

Henry Pickering Bowditch. (Obituary in which an **appreciation** by Osler appears.) *Lancet,* Lond., 1911, i, 975.

Sir Astley Cooper's case of ligature of the abdominal aorta. (Letter, June 24, 1911, signed.) *Guy's Hosp. Gaz.*, Lond., 1911, xxv, 277.

The Abbots of Reading, memorial tablet unveiled by Sir William Osler. Containing Sir William Osler's **remarks.** *Reading Standard*, Sat., July 15, 1911.

MSS. of these remarks is in the Bibliotheca Osleriana.

Train de luxe—Paris to Naples. (Letter from Naples dated Feb. 4, 1911.) *The Times*, Lond., Feb. 9, 1911, p. 6.

1912

(Life and letters of Dr. William Beaumont, including hitherto unpublished data concerning the case of Alexis St. Martin, by Jesse S. Myer.) **Introduction** by Dr. Osler. St. Louis, C. V. Mosby Co., 1912.

A Drake monument. (Signed letter, dated March 21, 1912). *Lancet-Clinic*, Cincin., 1912, cvii, 421.

A letter to Paul G. Woolley, Dean of the Medical Department, University of Cincinnati, ending: "If anybody will give the amount ($25,000) suggested, I will come out and give a regular Mississippi Valley oration."

Robert Fletcher. (Letter, signed.) *Bristol M. Chir. J.*, 1912, xxx, 289-294.

This note was written by request, as an appreciation, but had to be changed into an obituary, owing to the sudden death of Dr. Fletcher (who was born at Bristol), on Nov. 8, 1912. Osler speaks here of his first meeting with Fletcher, in 1881, when he was looking up the subject of echinococcus disease at the Library of the Surgeon-General's office, and pays a warm tribute to the work done by him at that Library, at the Johns Hopkins Hospital, and elsewhere.

Robert Fletcher, M.D., Columb., M.R.C.S., Eng., L.S.A., of the Surgeon-General's Library, Washington, U.S.A. (Obituary). *Lancet*, Lond., 1912, ii, 1471-1472.

A Down Survey manuscript of William Petty. (Delivered at the Royal Society Medicine, London, Nov. 20, 1912.) *Proc. Roy. Soc. Med.*, Lond., 1912-13, vi, (Hist. Sect.), 2-5. *Also, Lancet*, Lond., 1912, ii, 1504-1505: *Med. Mag.*, Lond., 1913, xxii, 36-39.

This was the first contribution at the inaugural meeting of this section and followed upon his introductory address (listed under V.). "Pepys in the celebrated Diary has many notices of Petty, who, he says, 'In discourse methinks one of the most rational men that ever I heard speak with a tongue, having all his opinions most distinct and clear' —a judgment amply confirmed by all those who have studied the writings of this remarkable man."

Men and books: I. Nicolaus Steno. *Canad. M. Ass. J.*, Toronto, 1912, ii, 67-68; **II. Les collections artistiques de la Faculté de Médecine de Paris.** *Ibid.*, 68-69; **III. Samuel Wilkes.** *Ibid.*, 70-71; **IV. Jean Astruc and the higher criticism.** *Ibid.*, 151-152; **V. Two Frenchmen* on laughter.** *Ibid.*, 152-155; **VI. An incident in the life of Harvey.** *Ibid.*, 246-247; **VII. Letters of Lænnec.** *Ibid.*, 247-248; **VIII. Dr. Payne's Library.** *Ibid.*, 248-249; **IX. The funeral of Lord Lister.** *Ibid.*, 343-344; **X. Gui Patin.** *Ibid.*, 429-430; **XI. George Bodington.** *Ibid.*, 526-527; **XII. Histoire de la Charité.** *Ibid.*, 527-528; **XIII. The School of Physic, Dublin.** *Ibid.*, 833-835; **XIV. Kelly's American Medical Biography.** *Ibid.*, 938-939; **XV. The works of John Caius.** *Ibid.*, 1034-1036; **XVI. William Beaumont.** *Ibid.*, 1136-1138.

*Joubert (1567) and Bergson.

1913

A way of life. (Address to Yale students, April 20, 1913.) London: Constable & Co., 1913, 62 pp., 24°. *Also*, New York: P. B. Hoeber, 1914, 62 pp. 24°.

Written on the steamer going to America, and bears evidence of this and of the recent wreck of the *Titanic* in its similes, "day-tight compartments as the most certain way to insure safety on the voyage" (of life), etc.

Early portraits of John Banister, of William Harvey and the barber-surgeons' visceral lecture, 1581. (**Remarks** in discussion, Section of the History of Medicine, Royal Society of Medicine, London, Nov. 20, 1912.) Rept. *Proc. Roy. Soc. Med.*, Lond., 1912-13, vi, Sect. Hist. Med., 35.

Men and books: XVII. The young Lænnec. *Canad. M. Ass. J.*, Toronto, 1913, iii, 137-140; **XVIII. Mediæval medicine.** *Ibid.*, 140-141; **XIX. Robert Fletcher.** *Ibid.*, 227-228; **XX. Jacques Benigne Winslow;** *Ibid.*, 319-321; **XXI. Aristotle, Greek thinkers by Gomperz, vol. iv.** *Ibid.*, 416-417; **XXII. Dr. Slop.** *Ibid.*, 612-613; **XXIII. John Shaw Billings.** *Ibid.*, 613-616.

Medical incunabula. (Letter signed by William Osler, President of the Bibliographical Society, dated Oxford, March 8th, 1913.) *Brit. M. J.*, Lond., 1913, i, 58.

Requesting lists of medical incunabula in private collections.

Memorial to Lord Lister. (Remarks at a meeting at the Examination Schools, Oxford, Mar. 8, 1913.) Rept. *Brit. M. J.*, Lond., 1913, i, 574.

John Shaw Billings. (Signed obituary.) *Brit. M. J.*, Lond., 1913, i, 641-642.

"An important interview I had with him illustrates the man and his methods. Early in the spring of 1889 he came to my rooms, Walnut Street, Philadelphia. Without sitting down, he asked me abruptly, 'Will you take charge of the Medicine Department of the Johns Hopkins Hospital?' Without a moment's hesitation I answered 'Yes'. 'See Welch about its details; we are to open very soon. I am very busy to-day; good morning;' and he was off, having been in my room not more than a couple of minutes."

John Shaw Billings. (Statement among obituary notices.) *Lancet*, Lond., 1913, i, 860.

"Incidentally, he was one of the greatest bibliographers and librarians of his generation. . . . That the Surgeon-General's Library, Washington, is a unique collection is owing to his remarkable skill and judgment. The index catalogue is one of the most important bibliographical works ever undertaken. The conception and the organization were his. After retiring from the army he consolidated and managed the New York Public Library and lived to see it housed in the present superb building. . . . At intervals he found time to plan the Johns Hopkins Hospital, to write a big dictionary, to superintend the vital statistics of the two Censuses, and to do all sorts of odd jobs in connection with public health."

John Shaw Billings. (Remarks made at a memorial meeting at the New York Public Library, April 25, 1913.) *Bull. N. Y. Public Library*, 1913, xvii, 511-535. Rept. *Brit. M. J.*, Lond., 1913, ii, 685. *Abstr.: Library J.*, New York, 1913, xxxviii, 334-335.

Appreciation of Nathaniel H. Alcock, M.D., Dub., D.Sc., Lond. *Brit. M. J.*, Lond., 1913, i, 1353.

Jean Astruc. (Letter). *The Times*, Lond., June, 1913.
(Not verified. *Editors.*)

1914

Suggested scheme for the restoration of the tomb of Avicenna. **Statement** by Sir Wm. Osler. *Proc. Roy. Soc. Med.*, Lond., 1913-14, vii, (Sect. Hist. Med.), 280.

Burton's Anatomy of Melancholy. *Yale Rev.*, N. Haven, 1913-14, iii, 251-271. [*In his:* C. r., 1907-20, vi, No. 304.]

"We can best oppose any tendency to melancholy by an active life of unselfish devotion to others; and with the advice with which Burton ends the book, I will close:

Sperate miseri;
Carete felices.
If unhappy, have hope;
If happy, be cautious."

[Silas Weir Mitchell, M.D., LL.D.] (Obituary.) *Brit. M. J.*, Lond., 1914, i, 120-121.

"For nearly thirty years I have enjoyed the friendship of Weir Mitchell, so that it is difficult to write in measured terms about his character and work. Of no man I have known are Walter Savage Landor's words more true: 'I have warmed both hands before the fire of life.' . . . He reminds one of Mead, who filled so large a place in the public and professional life of the early part of the eighteenth century. . . . But a much closer parallel is with the great eighteenth century Tuscan, Francesco Redi."

Incunabula medica. A study of the earliest printed medical books (1467-1480). (Presidential address read before the Bibliographical Society, London, Jan. 19, 1914, with title **Printed Medical Books to 1480.**) *News Sheet of the Bibliographical Society*, Feb., 1914, 2-4. *Also, Tr. Bibliographical Soc.*, 1913-15, Lond., 1916, xiii, 5-8: *Brit. M. J.*, Lond., 1914, i, 205: *Lancet*, Lond., 1914, i, 255. (The earliest printed medical books).

Contains remarks which, but for Osler's death would have been expanded; followed by a list of medical books printed before 1480 which have been arranged by Mr. V. Scholderer and were published with the address and a preface by A. W. Pollard by the Bibliographical Society in 1923.

Locke's expulsion from Christ Church. *Oxford Mag.*, Mar. 12, 1914.

Some MSS. and books in the Bodleian Library illustrating the evolution of British surgery. (**Demonstration**, by Dr. Osler, Association of Provincial Surgeons, Oxford, Mar. 27, 1914.) *Brit. M. J.*, Lond., 1914, i, 825-826.

The proposed general catalogue of incunabula. *Bull. Med. Library Ass.*, Balt., 1914, iii, 45-48.

Roswell Park, M.D., LL.D. (Unsigned obituary.) *Lancet*, Lond., 1914, i, 780.

Men and books: XXIV. Israel and medicine. *Canad. M. Ass. J.*, Toronto, 1914, iv, 729-733; **XXV. "Looking back".** 1889. *Ibid.*, 1012-1014; **XXVI. Nathan Smith.** *Ibid.*, 1109-1111.

Israel and medicine, was given as an address on the twenty-fifth anniversary of the Jewish Historical Society of England and was reprinted in the *Menorah J.*, N. Y., 1915, i, 145-149.

Sir James Y. Simpson and anæsthesia. (Correspondence dated Oxford, Oct. 26, 1914, signed.) *Lancet,* Lond., 1914, ii, 1067.

Long and anæsthesia. (Correspondence, dated Oxford, Nov. 16, 1914, signed.) *Lancet,* Lond., 1914, ii, 1219-1220.

1915

(The Gold-Headed Cane, by William Macmichael.) **Introduction** by Dr. Osler. New York: P. B. Hoeber, 1915, pp. v-ix. (Preface by F. R. Packard.)

Jean Astruc. (Remarks in **discussion**, Section of the History of Medicine, Royal Society of Medicine, London, Feb. 17, 1915.) *Proc. Roy. Soc. Med.*, Lond., 1913-15, vii-viii, (Sect. Hist. Med.), 71.

William Withering. (Remarks in **discussion**, Section of History of Medicine, Royal Society of Medicine, London, March 17, 1915.) *Proc. Roy. Soc. Med.*, Lond., 1914-15, viii, (Sect. Hist. Med.), 94.

Thomas Wesley Mills. (Unsigned obituary.) *Lancet,* Lond., 1915, i, 466. *Also, Brit. M. J.*, Lond., 1915, i, 403.

A tribute to Dr. Edward L. Trudeau; a medical pioneer. *Am. Med.*, N. Y. & Burlington, Vt., 1915, xxi, 20-21.

The Jonathan Hutchinson iconography. A preliminary note. *Johns Hopkins Hosp. Bull.*, Balt., 1915, xxvi, 82-83.

Sir Charles Tupper, Bart. (Initialled obituary.) *Lancet,* Lond., 1915, ii, 1049-50. *Also, Brit. M. J.*, Lond., 1915, ii, 694-695.

1916

A new commentary on Harvey. (Editorial.) *Lancet,* Lond., 1916, i, 416-417.

Creators, transmuters and transmitters. As illustrated by Shakespeare, Bacon, and Burton. (Remarks at the opening of the Bodley Shakespeare Exhibition, April 24, 1916.) London: Oxford Press, 1916, 8 pp. 12°. (Privately printed.) [*In his:* C. r., 1907-20, vi, No. 315.]

Treats of Shakespeare, Bacon and Robert Burton as examples of the three types.

"Only by the labours of transmuters has progress been made possible, and their works will fill the shelves of the concentrated *Bibliotheca prima* of the future."

The late Professor John Ferguson. (Tribute by Dr. Osler.) *Trans. Bibliog. Soc.*, Lond., 1915-1917, xiv, 133-135. *Also,* Rept. *Glasgow Herald,* 1916, Nov. 25, p. 4.

"The merit that appeals to me is a combination of biography with bibliography—beside the book is a sympathetic picture of the man himself."

Sir Victor Horsley. (Unsigned obituary.) *Brit. M. J.*, Lond., 1916, ii, 165.

1917

The Anatomie Universelle of Ambroise Paré. (2 illustrations). (Editorial.) *Ann. Med. Hist.*, N. Y., 1917, i, 424-425.

Autograph of Rabelais. (Initialled note.) *Bodleian Quart. Rec.,* (1914-16), Oxford, 1917, i, 117-118.

Illustrations of the book-worm. (With coloured plate.) *Bodleian Quart. Rec.*, (1914-16), Oxford, 1917, i, 355-357. [*In his:* C. r., 1907-20, vi, No. 316.]

Louisa Parsons. (Extracted from a letter or article inserted in an editorial on L. Parsons and signed "W. O."). *Johns Hopkins Nurses Alumnae Mag.*, Balt., 1917, xvi, 2-3.

Franklin Paine Mall, M.D. (Obituary, signed "W. O."). *Lancet*, Lond., 1917, ii, 841.

(A patronal festival for Thomas Willis (1621-1675), by H. Viets.) **Remarks** by Dr. Osler. *Ann. Med. Hist.*, N. Y., 1917, i, 118-124.

(Studies in the history and method of science, edited by Charles Singer.) **Introduction**, by Dr. Osler. Oxford: Clarendon Press, 1917, 304 pp. 8°.

The first printed documents relating to modern surgical anæsthesia. (Remarks on presenting Morton's original papers to the Royal Society of Medicine, London, May 15, 1918.) *Proc. Roy. Soc. Med.*, Lond., 1917-18, xi, (Sect. Hist. Med.), 65-69. *Also, Ann. Med. Hist.*, N. Y., 1917, i, 329-332. [*In his:* C. r., 1907-20, vi, No. 320.]

Outlines the way in which he was arranging the collection in his own library.

Note on Boerhaave's position as a scientific observer. Read October 17, 1917, at Royal Society of Medicine, London, Sect. Hist. Med. (not published).

[**Introductory remarks** at the complimentary dinner to the President of the Library Association, Mr.—later Sir—J. Y. W. MacAlister, December 14, 1917, (Prof. Sir William Osler in the Chair).] *Library Ass. Rec.*, Lond., 1918, xx, 49-50.

1918

Theodore C. Janeway. (Unsigned obituary.) *Lancet*, Lond., 1918, i, 80.

(Rabelais in his writings, by W. F. Smith.) (Unsigned **annotation.**) *Lancet*, Lond., 1918, i, 644-645.

The evolution of scientific medicine in America. (**Speech** to University Extension Students, summer school, Cambridge, Aug. 7, 1918.) *Abstr.: Brit. M. J.*, Lond., 1918, ii, 149. *Also, edit.*, 166-167. *Also*, under title, **Medicine in America**, *The Hospital*, Lond., 1918, lxiv, 433.

Leonard George Guthrie, M.D., Oxon., F.R.C.P. *Brit. M. J.*, Lond., 1919, i, 29.

Benjamin Rush (annotation). *Lancet*, Lond., 1918, ii, 889-890.

1919

Currie's "Journal". *Ann. Med. Hist.*, N. Y., 1919, ii, 81.

(Aspects of death and correlated aspects of life in art, epigram and poetry, by Frederick Parkes Weber, 3. ed. New York: P. B. Hoeber, 1918, 786 p. 8°. Signed **book review.** *Ann. Med. Hist.*, N. Y., 1919, ii, 84-85.

History of medicine. In: Encyclopedia Americana, New York and Chicago, 1920, xviii, 571-579. Same as: **A concise history of medicine**, Medical Standard Book Co., Balt., 1919.

From its contents this does not appear to have been written entirely by Osler. It is signed William Osler, Regius Professor of Medicine, Oxford University, in this edition and those of 1919 and 1922. In the last edition (1924) the signature reads,—William Osler, M.D., Late Regius Professor of Medicine, Oxford University. *A. M.*

Illustrations of an attempt to collect a Bibliotheca prima in science and in medicine. (Classical Association, Oxford, May 17, 1919.) (Privately printed.) *Also, Ann. Med. Hist.*, N. Y., 1919, ii, 211-212.

In the original, a privately printed sheet given away to the members of the Classical Association at an exhibition of first editions of physicians and scientists who, in Osler's opinion, did the most for the advancement of medicine. In cataloguing his library, Osler placed the printed books and MSS. of these men into the first section (Bibliotheca prima).

The re-stocking of Louvain Library. (Signed correspondence dated Oxford, June 9, 1919. *Lancet*, Lond., 1919, i, 1042.

The old humanities and the new science. (Presidential address delivered before Classical Association, Oxford, May 16, 1919.) *Proc. Classical Ass.*, Lond., 1919. *Also*, London: John Murray, 1919, 32 pp. 8°: *Brit. M. J.*, Lond., 1919, ii, 1-7: Boston & New York: Houghton, Mifflin & Co., 1920, xxii + 64 pp. 8°. (Introduction by Harvey Cushing). [*In his:* C. r., 1907-20, vi, No. 323.]

This was Osler's last important public address, revealing his essential thoroughness in classical scholarship.

Charles Arthur Mercier, M.D., London. (Obituary.) *Brit. M. J.*, Lond., 1919, ii, 364-365. *Also, J. Mental Science*, 1920, lxvi, 9.

Walt Whitman's message. The glory of the day's work. (Letter from Oxford dated June 2, 1919.) *The Times*, Lond., June 4, 1919, p. 8.

[**Address** on acceptance of two anniversary volumes of essays (contributions to medical and biological research), presented at the Royal Society of Medicine on July 11, 1919, being the eve of Sir William Osler's 70th birthday.] *Brit. M. J.*, Lond., 1919, ii, 80. *Also*, (Reported by F. H. Garrison), *Science*, N. Y. & Lancaster, Pa., 1919, n. s., l, pt. i, 244-246.

1920

(Sir Victor Horsley. A study of his life and work, by Stephen Paget. London: Constable & Co., 1919, 385 pp. 8°.) **Book review.** *Oxford Mag.*, 1920, xxxviii, 175. [*In his:* C. r., 1907-20, vi, No. 324.]

Written in bed in the autumn of 1919, during Osler's last illness. His last published writing.

1921

Evolution of modern medicine. (A series of six lectures delivered by Sir William Osler at Yale University on the Silliman Foundation, April 21-28, 1913.) New Haven: Yale University Press, 1921, xvi, 244 pp. *Extracted, Yale Alumni Weekly*, N. Haven, 1913, xxii, 832. *Abstr.: Science*, N. Y. & Lancaster, Pa., 1913, n. s., xxxvii, 701-702.

These lectures were described by Osler, in the preface, as an "aeroplane flight over the progress of medicine through the ages." The first of the galleys were corrected by the author with his customary meticulous care; but the work was interrupted by the War and his death before completion. Those who saw the book through publication have paid their tribute in the following words: "The editors have no hesitation in presenting these lectures to the profession and to the reading public as one of the most characteristic productions of the best-balanced, best equipped, most sagacious and most lovable of all modern physicians."

V. MEDICAL EDUCATION, MEDICAL SOCIETIES, AND MEDICAL PROFESSION

CANADIAN PERIOD

(1869-1884)

1873

Berlin correspondence. (Initialled correspondence dated Nov. 9, 1873.) *Canada M. & S. J.*, Montreal, 1873-74, ii, 231-233.

An account of living conditions at Berlin, and of Frerichs, Traube, Westphal, and others.

1874

Berlin correspondence. (Initialled correspondence dated Nov. 25, 1873.) *Canada M. & S. J.*, Montreal, 1873-74, ii, 308-315.

A word picture of Virchow, his Pathological Institute, his post-mortem technique and Saturday conferences, with a good description of Berlin university life, including duelling and drinking .

Vienna correspondence. (Initialled correspondence dated Mar. 1, 1874.) *Canada M. & S. J.*, Montreal, 1873-74, ii, 451-456.

Describes the medical life in Vienna and ends with an account of the seventieth birthday demonstrations in honor of Rokitansky.

1875

Introductory remarks to, and synopsis of, practical course on institutes of medicine. *Canada M. & S. J.*, Montreal, 1875-76, iv, 202-207.

For details see pages 191 and 192 of this Volume.

Valedictory address to the graduates in medicine and surgery, McGill University. (Delivered at the Annual Convocation, Mar. 31, 1875.) *Canada M. & S. J.*, Montreal, 1874-75, iii, 433-442. [*In his:* C. r., 1870-82, i, No. 4.]

Lack of professional esprit de corps. (Open letter.) *Canada Lancet*, Toronto, 1875-76, viii, 221-222.

1876

[Circular letter to the graduates of McGill University reporting the organization of the McGill Graduates Society, at meetings held for this purpose July 15th, 1876, and presenting a provisional constitution and names of officers elected.] Signed R. A. Ramsay, B.C.L., President, and Wm. Osler, M.D., Secretary.

1877

Introductory address at the opening of the forty-fifth session of the Medical Faculty, McGill College. *Canada M. & S. J.*, Montreal, 1877-78, vi, 193-210. [*In his:* C. r., 1870-1882, i, No. 14.]

Transactions of the International Medical Congress of Philadelphia, 1876. Edited for the Congress by Dr. John Ashhurst, Jr. Philadelphia: Collins, Printer, 1877, 1153 pp., Imp. 8°. (Unsigned book review.) *Canada M. & S. J.*, Montreal, 1877-78, vi, 270-278.

Harvard School of Medicine. (Signed correspondence.) *Canad. J. M. Sc.*, Toronto, 1877, ii, 274-276.

1878

(Hospitals—their history, organization and construction. Boylston Prize-essay of Harvard University for 1876, by W. Gill Wylie. New York: D. Appleton & Co., 1877, 240 pp., (8 plates, 10 text fig.), 8°. (Unsigned **book review.**) *Canada M. & S. J.*, Montreal, 1877-78, vi, 313-316.

The title page bears the motto: "An ounce of prevention is worth a pound of cure."

[**Letter on behalf of Publication Committee of Canada Medical Association** calling for subscribers to transactions.] (Signed Wm. Osler, M.D., Chairman, 1351 St. Catherine St., Montreal.) *Canad. J. M. Sc.*, Toronto, 1878, iii, 382.

1879

Report of meeting of American Association for the Advancement of Science, Saratoga, N. Y., Aug. 27, 1879. *Canada M. & S. J.*, Montreal, 1879-80, viii, 63-68.

1880

[**Circular letter** from the Graduates Society of McGill University, to its members, announcing the inauguration of a campaign to raise a fund of $30,000 for the endowment of the principalship in honor of the 25th anniversary of Sir William Dawson's tenure of this office.] Dated April 12th, 1880, and published in the *Proceedings.*

This letter is signed by L. Ruggles Church, President, and C. H. McLeod, Secretary, but names W. Osler, M.D., as first Vice-President.

Report of meeting of American Medical Association, New York, June 1, 1879. *Canada M. & S. J.*, Montreal, 1879-80, viii, 502-504.

Brief description of the physiological laboratory, McGill College. *Canada M. & S. J.*, Montreal, 1880-81, ix, 198-201.

1881

The model hospital. (Unsigned editorial.) *Canad. J. M. Sc.*, Toronto, 1881, vi, 154-157.

An account of the pretended discovery of the ruins of the city of Otnorot in the desert of Sahara which was famed for its "model hospital", being an allegorical statement of changes afterward effected in the Johns Hopkins Hospital. In an introductory paragraph the Editor writes: "The exigencies of space have required us to abscind the seemingly less essential portion of the manuscript, and we have taken the liberty to suppress one or two expressions which might offend where no offense was meant."

Report of inaugural meeting Ontario Medical Association. *Canada M. & S. J.*, Montreal, 1880-81, ix, 662-665.

The VII. International Medical Congress, London, dated August 10, 1881. (Initialled.) *Canada M. & J.*, Montreal, 1881-82, x, 121-125.

Describes the addresses of Sir James Paget and Professor Virchow, and the museum with exhibits by Sir Jonathan Hutchison, Ord, Parrot, Politzer, Roddick and others.

Notes of the second demonstration in the morbid anatomy course of McGill College. *Canad. J. M. Sc.*, Toronto, 1881, vi, 350-353.

1882

Students' notes. I. Normal histology for laboratory and class use. Montreal, Dawson Bros., 1882, 63 pp., 8°. (See Fig. 14.)

Title page reads: "By Wm. Osler, M.D., Member of the Royal College of Physicians, London; Fellow of the Royal Microscopical Society; Professor of the Institutes of Medicine, McGill University; Physician and Pathologist to the General Hospital, Montreal."

A treatise on human physiology, designed for the use of students and practitioners of medicine, by John C. Dalton, 7. ed. Philadelphia: Henry C. Lea's Son & Co., 1882, 722 pp., 8°. (Initialled **book review.**) *Am. J. M. Sc.*, Phila., 1882, n. s., lxxxiv, 222-223.

Evidences Osler's intimate knowledge of physiology, acquired by teaching. A shorter review of the same work, possibly also from his hand, but unsigned, appears in the *Canada M. & S. J.*, Montreal, 1881, x, 679.

Doctors' signs. (Unsigned editorial.) *Canad. J. M. Sc.*, Toronto, 1882, vii, 306.

["The University."] **Toast** by the president, at annual dinner of the Graduates Society of McGill University, May 2nd, 1882. *Canada M. & S. J.*, Montreal, 1881-82, x, 631-633.

Medico-Chirurgical Society of Montreal. (Specially **reported.**) *Med. News*, Phila., 1882, xl, 80-83; 249-252; xli, 580-582.

1883

[McGill medical students not in a general state of revolt.] (Signed **correspondence.**) *L'Union Méd. du Canada*, Montreal, 1883, xii, 100.

[**Resolution** proposed at meeting of Triennial Assembly of the College of Physicians and Surgeons of the Province of Quebec.] Rept. *L'Union Méd. du Canada*, Montreal, 1883, xii, 377.

Medico-Chirurgical Society of Montreal. (Specially **reported.**) *Med. News*, Phila., 1883, xlii, 251; 293; 636.

1884

Letter from Berlin. (Initialled correspondence.) *Canada M. & S. J.*, Montreal, 1883-84, xii, 721-728.

Full length account of Virchow and von Frerichs, a visit to the abattoir, the Jewish question, and various other matters are discussed.

Letter from Leipzig (from a special correspondent). *Canada M. & S. J.*, 1884-85, xiii, 18-20. (Initialled correspondence).

Reviews *re* work of Professors Wagner, Ludwig and Leuckart.

Notes from the German Medical Congress (Frerich's Festival). (Signed). *Canad. Pract.*, Toronto, 1884, ix, 184-186.

Doctors at law. (From our special correspondent. Unsigned). *Med. News*, Phila., 1884, xliv, 203.

Canada Medical Association, 17th annual meeting, held at Montreal, Aug. 25-27, 1884. (Specially **reported** for The Medical News.) *Med. News*, Phila., 1884, xlv, 2338-336.

Medico-Chirurgical Society of Montreal. (Specially **reported.**) *Med. News*, Phila., 1884, xliv, 25-26; 81-83; xlv, 718-720.

DEPARTMENT OF INSTITUTES OF MEDICINE McGILL COLLEGE.

STUDENTS' NOTES.

I

NORMAL HISTOLOGY

FOR

LABORATORY AND CLASS USE.

BY

WM. OSLER, M.D.,

MEMBER OF THE ROYAL COLLEGE OF PHYSICIANS, LONDON; FELLOW OF THE ROYAL MICROSCOPICAL SOCIETY, LONDON; PROFESSOR OF THE INSTITUTES OF MEDICINE McGILL UNIVERSITY; PHYSICIAN AND PATHOLOGIST TO THE GENERAL HOSPITAL, MONTREAL.

MONTREAL:

DAWSON BROTHERS, PUBLISHERS.

1882.

FIG. 14.—Title page of Osler's first Laboratory Manual for Students' use. (Illustrating Rubric V.)

PHILADELPHIA PERIOD

(1885-1889)

1885

Medico-chirurgical transactions, published by the Royal Medical and Chirurgical Society, London, 2. ser., xlix. 8vo., Longmans, Green & Co., 1884. (Initialled **book review.**) *Am. J. M. Sc.*, Phila., 1885, n. s. s., xc, 220-222.

Notes of a visit to European medical centres. (Signed editorial.) *Arch. Med.*, N. Y., 1885, xii, 170-184.

On the growth of a profession. (Presidential address delivered at the 18th annual meeting of the Canadian Medical Association, held at Chatham, Ontario, Sept. 2, and 3, 1885.) *Canada M. & S. J.*, Montreal, 1885-86, xiv, 129-155. *Also*, under title, "**Du dévelopement de la profession médicale en Canada,**" *L'Union M. du Canada*, Montreal, 1885, xiv, 481-489; 529-539. *Also, Med News*, Phila., 1885, xlvii, 337-345: *Canad. Pract.*, Toronto, 1885, x, 312. *Reviewed* editorially, *Med. Times & Gaz.*, Lond., 1885, ii, 507-508. *Abstr.: Canada Lancet*, Toronto, 1885-86, xviii, 65-69. [*In his:* C. r., 1882-92, ii, No. 68.]

[**Remarks at opening of new building for the Medical Faculty of McGill University**, Oct. 22, 1885.] *Canada M. & S. J.*, Montreal, 1885-86, xiv, 242-243.

Medicine in China. (Unsigned editorial.) *Med. News*, Phila., 1885, xlvii, 437-438.

Review of the second annual report of the Soochow Hospital.

The medical news visiting list, 1886, Phila., 1885. Lea Bros. & Co. (Unsigned **book review.**) *Med. News*, Phila., 1885, xlvii, 662-663.

1886

(The medicine of the future, by Austin Flint, Sr. New York: D. Appleton & Co., 1886, 37 pp. 12°.) **Review** by Dr. Osler. *Am. J. M. Sc.*, Phila., 1886, n. s., xcii, 495-498.

The Association of American Physicians. (Unsigned editorial.) *Med. News*, Phila., 1886, xlviii, 710.

Comments upon the organization and first annual meeting of this society.

1887

Notes and comments: [I. Worry of examinations, three groups of students; II. Rejections at final examination; III. Example of an amusingly stupid answer.] *Canada M. & S. J.*, Montreal, 1886-87, xv, 637-639.

Notes and comments: [I. Re-establishment of faculty of medicine of University of Toronto; II. Memorials of the craft of surgery in England, by Dr. John Flint South; III. Macte Lister triumphator, a vade mecum of visceral surgery in verse, by Dr. Risorius Santorini; IV. Professional custom in cards] *Canada M. & S. J.*, Montreal, 1887-88, xvi, 189-191.

The University of Westminster. (Unsigned editorial.) *Med. News*, Phila., 1887, l, 102.

On the proposed amalgamation, under this title, of the Colleges of Physicians and Surgeons of London.

[Progress made by the Japanese in modern medical methods as illustrated by the Journal of the College of Medicine of the Imperial University, Tokio.] (Unsigned **editorial.**) *Med. News*, Phila., 1887, li, 662.

1888

Report of the Medical Examining Board of Virginia. (Letter from Philadelphia dated Sept. 22, 1888.) *J. Am. M. Ass.*, Chicago, 1888, xi, 429.

Dr. Ord and the "Family Doctor". (Letter from Philadelphia dated Sept. 29, 1888.) *J. Am. M. Ass.*, Chicago, 1888, xi, 502.

The fourth year at Harvard. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 298.

Analysis of the report of President Eliot on his proposition.

The Philadelphia hospital. (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 298.

On the statement on this institution embodied in the recent report.

[The fire in the Medical Hall of the University of Pennsylvania.] (Unsigned editorial.) *Med. News*, Phila., 1888, lii, 642.

It destroyed the histological and pathological laboratories, and damaged the Stillé Laboratory and the Wistar and Horner museums.

Notes and comments: [....III. "Doctor and patient," by Dr. Weir Mitchell.] *Canada M. & S. J.*, Montreal, 1887-88, xvi, 447-448.

(See also under Rubric III.)

1889

License to practice. (Annual address delivered as Professor of Medicine before the Medico-Chirurgical Faculty of Maryland, April 24, 1889.) *Maryland M. J.*, Balt., 1889, xxi, 61-67. *Also, Tr. M. & Chir. Fac. Maryland*, Balt., 1889, 70-82: *J. Am. M. Ass.*, Chicago, 1889, xii, 649-645: *L'Union Méd. du Canada*, Montreal, 1889, xviii, 336-347. *Abstr.: Boston M. & S. J.*, 1889, cxx, 490-491. *Reviewed, L'Union Méd. du Canada*, Montreal, 1889, xviii, 388-389. *Also, Med. Rec.*, N. Y., 1889, xxxv, 689. [*In his:* C r., 1882-92, ii, No 96.]

Æquanimitas. (Valedictory remarks to the graduates in medicine of the University of Pennsylvania, May 1, 1889). Phila., 1889, W. F. Fell & Co., 10 p. 8°. Also in **Æquanimitas, with other addresses**, etc., 1904, 2nd ed., 1906, 3rd ed., 1914. [*In his:* C. r., 1882-1892, ii, No. 97.]

BALTIMORE PERIOD

(1890-1905)

1890

Letters to my house physicians. *N. York M. J.*, 1890, lii, 81; 163; 191; 274; 333. *Also, Montreal M. J.*, 1890-91, xix, 124; 303-308.

Provincial medical boards. (Correspondence.) *Montreal M. J.*, 1889-90, xviii, 479-480; 611-612.

1891

Doctor and nurse. (Remarks to the first class of graduates from the Training School for Nurses at the Johns Hopkins Hospital.) Baltimore: J. Murphy & Co., 1891, 11 pp. 4°. [*In his:* C. r., 1882-92, ii, No. 113.]

Recent advances in medicine. (Address at the fifteenth anniversary of the Johns Hopkins University, Feb. 23, 1891.) *Abstr.: Johns Hopkins Univ. Circ.*, Balt., 1891, x, 57-58. *Also, Science*, N. Y. & Lancaster, Pa., 1891, xvii, 170-171.

1892

Remarks on specialism. (Annual address of the president, made at the opening of the fourth annual meeting of the Pediatric Society, Boston, May 2, 1892.) *Boston M. & S. J.*, 1892, cxxvi, 457-459. *Also, Med. News*, Phila., 1892, lx, 542-544: *Arch. Ped.*, Phila., 1892, ix, 481-488. [*In his:* C. r., 1882-92, ii, No. 118.]

Teacher and student. (Address delivered on the occasion of the opening of the new building of the College of Medicine and Surgery, of the University of Minnesota, Oct. 4, 1892.) Baltimore: J. Murphy & Co., 1892, 22 pp. 8°. [*In his:* C. r., 1882-92, ii, No. 123.]

1894

The leaven of science. (Address delivered at the opening of the Wistar Institute of Anatomy and Biology of the University of Pennsylvania, May 21, 1894.) *Univ. M. Mag.*, Phila., 1893-94, vi, 573-586. *Also,* in *"Æquanimitas"*, 1. ed. London: H. K. Lewis, 1904, 2nd ed. 1906. [*In his:* C. r., 1892-97, iii, No. 148.]

A typographical error appears on p. 583 of the first reference, conclusion being printed for "exclusion."

The army surgeon. (An address delivered at the closing exercises of the Army Medical School, Washington, D. C., Feb. 28, 1894.) *Med. News*, Phila., 1894, lxiv, 318-322. *Also,* in *Æquanimitas,* Philadelphia: P. Blakiston's Son & Co., 1904, 389 pp., 12°; 1906, 475 pp. 8°; 1914, 425 pp. 12°. [*In his:* C. r., 1892-97, iii, No. 147.]

1895

Teaching and thinking: the two functions of a medical school. (Remarks at the opening of the new building of the Medical Faculty, McGill College, Jan. 8, 1895.) *Montreal M. J.*, 1894-95, xxiii, 561-572. [*In his:* C. r., 1892-97, iii, No. 153.]

President's address. Delivered at opening of the Association American Physicians, Washington, D.C., May 30, 1895. *Tr. Ass. Am. Physicians*, Phila., 1895, x, pp. xi-xv.

1896

Association of American Medical Colleges. (Introductory remarks by Dr. Osler, at the Atlanta, Ga., meeting.) *Bull. Am. Acad. M.*, Easton, Pa., 1895-96, 508-510.

Dr. Osler was then President of the Association.

[**Response** of the president on behalf of the Faculty.] (Proceedings of the semi-annual meeting of the Medical & Chirurgical Faculty of Maryland, Hagerstown, Md., Nov. 10, 1896.) *Maryland M. J.*, Balt., 1896-97, xxxvi, 137-138.

1897

Nurse and patient. An address. Baltimore: J. Murphy & Co., 1897, 17 p. 8°. [*In his:* C. r., 1897-1902, iv, No. 181.]

This address did double duty—first at the commencement exercises of the Philadelphia Hospital Training School, Feb., 1897, and again on June 3rd, at the Sixth Annual Commencement of the Johns Hopkins Hospital Training School.

"And now you reign supreme, and have added to every illness a domestic complication of which our fathers knew nothing..... Seriously, you but little reck the pangs which your advent may cause."

The functions of a state faculty. (President's address delivered before The Medical and Chirurgical Faculty of Maryland, at the ninety-ninth annual session, Baltimore, Md., April 27, 1897.) *Maryland M. J.*, Balt., 1897, xxxvii, 73-77. *Also, Tr. M. & Chir. Fac. Maryland,* Balt., 1897. 21-29. [*In his:* C. r., 1897-1902, iv, No. 179.]

British medicine in Greater Britain. The address in medicine delivered Sept. 1, 1897, at the British Medical Association, Montreal, Aug. 31 to Sept. 4, 1897. *Brit. M. J.*, Lond., 1897, ii, 576-581. *Also, J. Am. M. Ass.*, Chicago, 1897, xxix, 507-512: *Boston* M. *& S. J.*, 1897, cxxxvii, 221-227: *Med. News,* N. Y., 1897, lxxi, 293-298: *Montreal M. J.*, 1897, xxvi, 186-203: *Lancet,* Lond., 1897, ii, 584-589: *Brit. M. Ass., Daily J.*, Montreal, 1897, Part 3, 42-50: *Int. Med. Mag.,* Phila., 1897, vi, 543-558. *Abstr.: Med. Rec.,* N. Y., 1897, lii, 333-340. *Also,* under title **La médécine anglaise dans la Nouvelle Angleterre.** *L'Union Méd. du Canada,* Montreal, 1897, xxvi, 595-599. [*In his:* C. r., 1897-1902, iv, No. 183.]

An editorial reads: He was spoken of on all sides as "Our Osler," for he belongs to the entire English-speaking race, whether in America, Canada, or other portions of Great Britain.

Internal medicine as a vocation. Address delivered before the section on general medicine of the New York Academy of Medicine, October 19, 1897. *Med. News,* N. Y., 1897, lxxi, 660-663. *Also,* in *Æquanimitas with other addresses,* 1904, 2 ed. 1906, pp. 137-152. [*In his:* C. r., 1897-1902, iv, No. 185.]

1899

Clinical microscopy at Johns Hopkins Medical School, Baltimore, United States of America. *Brit. M. J.*, Lond., 1899, i, 69-70.

Address to the students of the Albany Medical College, Feb. 1, 1899. *Albany M. Ann.*, 1899, xx, 307-309.

[**Remarks at the dinner of the Medical and Chirurgical Faculty of Maryland, April 27, 1899.**] *Tr. Med. & Chir. Fac. Maryland,* 101st annual session (centennial anniversary), Balt., 1899, 55-58.

[On the medical tests for admission to the public services. Proceedings sixty-seventh annual meeting, British Medical Association, Portsmouth, Aug. 14, 1899.] **Discussion,** by Dr. Osler. Rept. *Brit. M. J.*, Lond., 1899, ii, 574.

This would appear to have been a general discussion between Osler, Sir Dyce Duckworth, E. J. Wallace and others.

After twenty-five years. (An address at the opening of the session of the Medical Faculty, McGill University, Sept. 21, 1899.) *Montreal M. J.*, Nov., 1899, xxviii, 823-833. [*In his:* C. r., 1897-1902, iv, No. 206.]

Discussed editorially in *B. M. & S. J.*, 1899, cxli, 502, (Nov. 16).

1900

The importance of post-graduate study. (Address delivered at the opening of the museums of the Medical Graduates College and Polyclinic, London, July 4, 1900.) *Lancet,* Lond., 1900, ii, 73-75. *Also, Brit. M. J.*, Lond., 1900, ii, 73-75. [*In his:* C. r., 1897-1902, iv, No. 214.]

[**Remarks** at the dinner in honor of Dr. Abraham Jacobi, New York, May 5, 1900.] *Maryland M. J.*, Balt., 1900, xliii, 320-322.

1901

On the influence of a hospital upon the medical profession of a community. (An address delivered at the celebration of the semi-centenary of the Troy Hospital, Troy, N. Y., Nov. 28, 1900.) *Albany M. Ann.*, Albany, 1901, xxii, 1-11.

The study of internal medicine. *Med. News*, N. Y., 1901, lxxviii, 645-647.

The natural method of teaching the subject of medicine. *J. Am. M. Ass.*, Chicago, 1901, xxxvi, 1673-1679. *Also, Clin. Bull.*, Richmond, 1901, vi, 107-117.

(British Congress on tuberculosis.) **(Correspondence.)** *Am. Med.*, Phila., 1901, i, 588. *Also, Phila. M. J.*, 1901, vii, 1226.

1902

A note on the teaching of the history of medicine. *Brit. M. J.*, Lond., 1902, ii, 93.

Chauvinism in medicine. (An address before the Canadian Medical Association, Montreal, Sept. 17, 1902.) *Montreal M. J.*, 1902, xxxi, 684-699. *Also, Phila. M. J.*, 1902, x, 432-439: *Canad. Pract. & Rev.*, Toronto, 1902, xxvii, 552-568: *Dominion M. Month.*, Toronto, 1902, xix, 192-209: *Canada Lancet*, Toronto, 1902-03, xxxvi, 93-111: (Transl.) *L'Union méd. du Canada*, Montreal, 1902, xxxi, 673-695. [*In his:* C. r., 1902-1907, v, No. 238.]

1903

On the educational value of the medical society. (Remarks made on the occasion of the centennial celebration of the New Haven Medical Association, Jan. 6, 1903.) *Boston M. & S. J.*, 1903, cxlviii, 275-279. *Also, Yale M. J.*, N. Haven, 1902-03, ix, 325-336. [*In his:* C. r., 1902-1907, v, No. 243.]

The master-word in medicine. (An address to medical students on the occasion of the opening of the new buildings of the Medical Faculty of the University of Toronto, Oct. 1, 1903.) Baltimore: J. Murphy Co., 1903, 33 p. 8°. *Also, Brit. M. J.*, Lond., 1903, ii, 1196-1200: *Canad. J. M. & S.*, Toronto, 1903, xiv, 333-347: *Montreal M. J.*, 1903, xxxii, 771-785: *Canad. Prac. & Rev.*, Toronto, 1903, xxviii, 616-630: *J. Alumni Ass. Coll. Phys. & Surg.*, Balt., 1903-04, vi, 97-109: *Canada Lancet*, Toronto, 1903-04, xxxvii, 214-228: *Johns Hopkins Hosp. Bull.*, Balt., 1904, xv, 1-7. [*In his:* C. r., 1902-1907, v, No. 248.]

An abridgement of the above appears to have been privately printed, 1903, (?), under the title: The master-word is work.

On the need of a radical reform in our methods of teaching senior students. *Med. News*, N. Y., 1903, lxxxii, 49-53. [*In his:* C. r., 1902-1907, v, 241.]

1904

Bed-side library for medical students. In *Æquanimitas*. Philadelphia, P. Blakiston's Son & Co., 1904, 389 pp. 12°. *Also*, 2. ed., *Idem.*, 1906, p. 475.

The hospital as a college. (Address delivered at the Academy of Medicine, N. Y., 1903.) In *Æquanimitas*, Phila., 1904, 329-342. *Also*, 2nd ed., 1906, 327-342.

1905

Valedictory address at Johns Hopkins University. (Delivered at the annual commencement exercises, Feb. 22, 1905.) *J. Am. M. Ass.*, Chicago, 1905, xliv, 705-710. *Reprinted as:* **The fixed period,** *In, Æquanimitas,* 1904, 2 ed., 1906, 391-411.

Unity, peace and concord. (A farewell address to the Medical and Chirurgical Faculty, and to the medical profession of the United States, delivered at the annual meeting of the Medical & Chirurgical Faculty of Maryland, Baltimore, Apr. 26, 1905.) Oxford: H. Hart, 1905, 22 pp. 8°. *Also, Maryland M. J.*, Balt., 1905, xlviii, 412-422: *J. Am. M. Ass.*, Chicago, 1905, xlv, 365-369. *Abstr.: St. Louis M. Rev.*, 1905, iii, 112-116. [*In his:* C. r., 1902-07, v, No. 255.]

The student life. A farewell address to Canadian and American medical students. Oxford: H. Hart, 1905, 32 pp. 8°. *Also, Canada Lancet,* Toronto, 1905-06, xxxix, 121-138: *Med. News,* N. Y., 1905, lxxxvii, 625-633: *St. Louis M. Rev.*, 1905, lii, 273-283: Modern Essays (Morley). New York: Harcourt, Horace & Co., 1921, 128-144: *Æquanimitas,* 1906, p. 413-443. [*In his:* C. r., 1902-1907, v, No. 256.]

[L'envoi.] (Remarks at farewell dinner to Dr. Osler given by the profession of the United States and Canada, New York, May 20, 1905, with report of his response.) *Med. News,* N. Y., 1905, lxxxvi, 859-860. *Also,* in *Æquanimitas,* 1904, 2 ed., Phila., 1906, 469-474.

OXFORD PERIOD

(1905-1919)

The Royal Dental Hospital of London. (Address to students of Royal Dental Hospital, in the galleries of the Royal Institute of Painters, Piccadilly, Oct. 13, 1905.) Rept. *Lancet,* Lond., 1905, ii, 1210-1211.

[Address at the distribution of prizes, University College, Faculty of Medicine, Bristol, Oct. 26, 1905.] Rept. *Brit. M. J.*, Lond., 1905, ii, 1234.

[Remarks before the Cardiff Medical Society, Nov. 14, 1905.] Rept. *Lancet,* Lond., 1905, ii, 1580.

A letter to graduates of the Johns Hopkins Medical School. *Johns Hopkins Hospital Bull.*, Balt., 1905, xvi, 410.

Thanking them for twelve volumes of their collected papers.

1906

[Remarks at the distribution of prizes at St. Thomas' Hospital, June 27, 1906.] *Lancet,* Lond., 1906, i, 1866.

[Remarks made in opening the Acland Home, Oxford, Oct. 13, 1906.] *Lancet,* Lond., 1906, ii, 1089-1090.

1907

Note on the use of a medical journal. *West. Canada M. J.*, Winnipeg, 1907, i, 1-3.

The Royal Medical Society of Edinburgh: particularly its relations with the profession of the United States and Canada. *Scot. M. & S. J.*, Edinb., 1907, xx, 239-246. [*In his:* C. r., 1907-20, vi, No. 267.]

Professor Osler on medical women's work. (Address at the annual prize-giving in connection with the London School of Medicine for Women, July 4, 1907.) *Med. Mag.*, Lond., 1907, xvi, 442-443. *Also, Lancet,* Lond., 1907, ii, 131.

The late Dr. Schorstein and medical education. (Signed correspondence, Feb. 24, 1907.) *Brit. M. J.*, Lond., 1907, i, 535.

The influence of the medical society on the education of the medical students. (Remarks at the University College Hospital Medical Society, Oct. 16, 1907.) Rept. *Brit. M. J.*, Lond., 1907, ii, 1151.

On the library of a medical school. (Johns Hopkins Medical School, Jan. 2, 1907.) *Johns Hopkins Hosp. Bull.*, Balt., 1907, xviii, 109-111. [*In his:* C. r., 1907-20, vi, No. 265.]

Remarks on the presentation of the Marburg Collection of books (gathered by physicians connected with Warrington Dispensary), to the Johns Hopkins Hospital Medical School.

1908

The functions of an out-patient department. (Remarks at the opening of the new out-patient department, Cardiff Infirmary, May 20, 1908.) Rept. *Brit. M. J.*, Lond., 1908, i, 1470-1473. *Also, St. Louis M. Rev.*, 1908, lvii, 344-346.

The disturbances at the Paris Medical School. (Letter from Paris dated Dec. 26, 1908.) *The Times*, Lond., Dec. 29, 1908, p. 4.

The scientific education of the medical student. (Remarks in **discussion** at 76th annual meeting British Medical Association, Sheffield, July 24-31, 1908.) Rept. *Brit. M. J.*, Lond., 1908, ii, 377.

Note on French and German for medical students. *Lancet*, Lond., 1908, ii, 957.

[**Remarks** on the British Medical Association.] At the annual dinner of the old Medical Society of London, Mar. 11, 1908.) Rept. *Brit. M. J.*, Lond., 1908, i, 704.

Vienna after thirty-four years. *J. Am. M. Ass.*, Chicago, 1908, i, 1523-1525. [*In his:* C. r., 1907-20, vi, No. 273.]

Old and new. (Annual oration on the occasion of the opening of the new building of the Medical and Chirurgical Faculty of Maryland, May 13, 1909.) *Bull. Med. & Chir. Fac. Maryland*, Balt., 1908-09, i, 248-259. *Also, J. Am. M. Ass.*, Chicago, 1909, liii, 4-8. [*In his:* C. r., 1907-20, vi, No. 283.]

1909

Rhodes scholarships: possibilities of Oxford life. *The Yale Daily News*, N. Haven, 1909, xxxiii, No. 4, 1-5.

(The late Sir George Parkin, Chairman of the Rhodes Scholarship gave me a copy and said Dr. Osler had written it. *A. M.*)

Impressions of Paris. I. Teachers and students. The reverence of the French for great men. (Paris, Jan. 15, 1909.) *J. Am. Med. Ass.*, Chicago, 1909, lii, 701-703; 771-774.

An editor's note says, "This is the first of a series of travel-notes by Prof. Osler, who is on a year's leave of absence from Oxford."

[Remarks on the medical library in post-graduate work.] (An **address** delivered at the inaugural meeting of the Medical Library Association, at Belfast, July 28, 1909.) Rept. *Brit. M. J.*, Lond., 1909, ii, 925-928. [*In his:* C. r., 1907-20, vi, No. 286.]

Teaching of therapeutics in the hospital wards. (Remarks in **discussion**, Oct. 5, 1909.) *Proc. Roy. Soc. Med.*, Lond., 1909-10, iii, Therapeutical and Pharmacological Sect., 7-9.

[**Remarks** at the opening of laboratories in the London Hospital, Oct. 15, 1909.] Rept. *Brit. M. J.*, Lond., 1909, ii, 1241.

Election intelligence Oxford University. (Contains a **circular letter** dated Oxford, Nov. 29, 1909, signed by W. Osler and F. Gotch.) *The Times*, Lond., Dec. 7, 1909, p. 10.

Supporting two candidatures for the forthcoming election of burgesses for Oxford.

1910

[**Résumé of introductory speech** at the annual meeting of the Medical Library Association, held in Library of the Royal College of Surgeons, July 26, 1910.] *Lancet*, Lond., 1910, ii, 582.

Specialists and specialism. (Unpublished **address** delivered before the Ophthalmological Congress, Oxford, July 24, 1910.)

Remarks on organization in the profession at the opening of the new building of Nottingham Medical Society, June 28, 1910.) *Brit. M. J., Lond.*, 1911, i, 237-239. *Abstr.: Lancet*, Lond., 1910, ii, 102.

1911

The extension or development of university education in medical schools and particularly by way of illustration with the organization of the medical clinic. (**Testimony**, by Dr. Osler, before the Royal Commission on University Education in London, July 21, 1911.) Appendix to the *Third Report of the Commissioners, Minutes of Evidence*, Nov., 1910, to July, 1911, Lond., 1911, 342-354.

A statement was handed in followed by a lengthy examination of the witness.

The pathological institute of a general hospital. (Address at opening of the new Pathological Institute of the Royal Infirmary, Glasgow, Oct. 4, 1911.) *Glasgow M. J.*, 1911, lxxvi, 321-333. [*In his:* C. r., 1907-20, vi, No. 297.]

Whole time clinical professors. (Letter to President Remsen of Johns Hopkins University dated Sept. 1, 1911.) (Printed but not published). [*In his:* C. r., 1907-20, vi, 295.]

Osler expresses himself with certain reservations as opposed to the scheme.

The hospital unit in university work. (Annual address delivered before the Northumberland and Durham Medical Society, Nov. 3, 1910. Rept. *Brit. M. J.*, Lond., 1910, ii, 1549-50. *Lancet*, Lond., 1911, i, 211-213. *Also, Northumberland & Durham M. J.*, Newcastle-upon-Tyne, 1911, xviii, 178-189. [*In his:* C. r., 1907-20, vi, No. 293.]

1913

[Oxford-student life and opportunities offered to Rhodes Scholars; Yale Medical School—improvements suggested—new departments and clinics needed.] *Yale Daily News*, N. Haven, 1913, xxxvi, 1; 5.

[**Introductory remarks** as chairman to the new section of the history of medicine of the Royal Society of Medicine, London, Nov. 20, 1912.] *Proc. Roy. Soc. Med.*, Lond., 1912-13, vi, (Hist. Sect.), 1-2. *Also, Med. Mag.*, Lond., 1913, xxii, 35-36.

This was followed by [A Down Survey manuscript of William Petty] (listed under Rubric IV), as the first contribution on the programme.

The work of Lord Lister. (**Remarks** made at a meeting at the examination schools, Oxford, March 8, 1913.) *Brit. M. J.*, Lond., 1913, i, 574.

Specialism in the general hospital. (Address delivered at the opening exercises of Henry Phipps Psychiatric Clinic, The Johns Hopkins Hospital, April 16, 1913.) *Am. J. Insan.*, Balt., 1912-13, lxix, No. 5 (Special Number), 845-855. *Also, Johns Hopkins Hosp. Bull.*, Balt., 1913, xxiv, 167-171: *Johns Hopkins Alumni Mag.*, Balt., 1913, i, 275-286. [*In his:* C. r., 1907-1920, vi, No. 301.]

[Commencement address to the nurses of the Johns Hopkins Training School, May 7, 1913.] *Johns Hop. Hosp. Nurses Alumnae Mag.*, 1913, **xii,** 72-81.

Relates his experiences with nurses in the old smallpox wards of the Montreal General Hospital; at Blockley and of Miss Alice Fisher; at Johns Hopkins and of Isabel Hampton Robb.

Modern cliniques. (Letter from the Athenæum Club, dated August 13, 1913.) *The Times*, Lond., Aug. 14, 1913, p. 4.

Medical education in Europe. (An unsigned report to the Carnegie Foundation for the Advancement of teaching. New York, 1912. It is Part II. of a larger report entitled "London University Reform.") *Quart. Rev.*, Lond., 1913, ccxix, 220-230.

[The organization of the Association.] **Remarks** on the improved organization of the Association on an international basis, made at a meeting of the International Association of Medical Museums held Aug. 5-7, 1913, in London, in conjunction with the 18th International Congress of Medicine.) *Lancet*, Lond., 1913, ii, 475. *Also, Bull. Intern. Ass. Med. Mus.*, Ann Arbor Press, 1915, v, 156-157.

An introductory address on examinations, examiners and examinees. (Delivered at the opening of the winter session at St. George's Hospital Medical School, Oct. 1, 1913.) *Brit. M. J.*, Lond., 1913, ii, 946-948. *Also, Lancet*, Lond., 1913, ii, 1047-1050: *Dublin J. M. Sc.*, 1913, cxxxvi, 313-327: *Quart. Fed. State Med. Bds. U. S.*, Easton, Pa., 1913, i, 101-114. [*In his:* C. r., 1907-20, vi, No. 302.]

"The conclusion of the matter is, the student needs more time for quiet study, fewer classes, fewer lectures, and, above all, the incubus of examinations should be lifted from his soul."

***Whole-time clinical professors at the Johns Hopkins Medical School.** (Letter initialled, dated Nov. 5). *Brit. M. J.*, Lond., 1913, ii, 1255.

On the endowment established by the General Education Board at the Johns Hopkins Medical School for whole-time clinical chairs. This letter is referred to editorially under the title "Whole-time Clinical Professorships" in the same number of the *B. M. J.*, and is also favourably commented upon in a letter on the same subject signed "L. E. S.," *Ibid.*, p. 1407. Osler's letter contains an appreciative reference to Professor Welch, with whose name the endowment was associated, "No man of his generation in the United States has so deeply influenced the profession, not only by his administrative ability and his stimulating work in pathology, but much more by a personal unselfish devotion to its highest interests."

Charles Francis Adams at Oxford. (Letter dated Oxford, Nov. 4, 1913). *The Nation*, N. Y., Nov. 27, 1913, xcvii, 503-505.

The American lecturer at Oxford on Medical Education in that country.

Presidential address. (British Hospitals Association, Oxford, July, 1913) *Med. Mag.*, Lond., 1913, xxii, 368-372; 383.

(Address made by Dr. Osler at the formal opening of the Peter Bent Brigham Hospital in April, 1913. Quoted in the report of the Surgeon-

* See footnote on pages 104 and 105.

THE MEDICAL CLINIC:

A RETROSPECT AND A FORECAST.

An Address

DELIVERED BEFORE THE ABERNETHIAN SOCIETY, ST. BARTHOLOMEW'S HOSPITAL, LONDON, DECEMBER 4TH, 1913.

BY

SIR WILLIAM OSLER, BART., M.D., F.R.S.,

REGIUS PROFESSOR OF MEDICINE, OXFORD.

Reprinted from the BRITISH MEDICAL JOURNAL, *January 3rd, 1914.*

LONDON:

PRINTED AT THE OFFICE OF THE BRITISH MEDICAL ASSOCIATION, 429, STRAND, W.C.

1914.

FIG. 15.—Facsimile of title page. (Illustrating Rubric V.)

in-Chief (Dr. Harvey Cushing) in the sixth annual report of the Peter Bent Brigham Hospital for the year 1919. *The University Press*, Cambridge, Mass., 1920.

1914

An address on the medical clinic; a retrospect and a forecast. (Delivered before the Abernethian Society, St. Bartholomew's Hospital, London, Dec. 4, 1913.) *Brit. M. J.*, Lond., 1914, i, 10-16. [*In his:* C. r., 1907-20, vi, No. 303.] (See Fig. 15.)

[An address at the opening of the pathological laboratory at the Royal Mineral Water Hospital, Bath, June 4, 1914.] Rept. *Brit. M. J.*, Lond., 1914, i, 1314-1315. *Also, Lancet*, Lond., 1914, i, 1689-1690.

Organization of the clinical laboratory. (Remarks at the Oxford and Reading Branch of the British Medical Association at Reading, July 23, 1914.) Rept. *Brit. M. J.*, Lond., 1914, ii, 335.

[Toast proposed to the president (Sir Alexander Ogston, K.C.V.O.)] (Annual dinner, British Medical Association, Aberdeen, July, 1914.) Rept. *Brit. M. J.*, Lond., 1914, ii, (suppl. p. 140.)

1915

[Address delivered at the luncheon held at the City Hall, Cardiff, Aug. 12, 1915, on the occasion of the laying of the foundation-stone of the new physiology department.] Cardiff, 1915, South Wales Printing Works, p. 7.

The coming of age of internal medicine in America. *Internat. Clin.*, Phila., ser. 25, 1915, iv, 1-5. [*In his:* C. r., 1907-20, vi, No. 313.]

1916

Intensive work in science at the public schools in relation to the medical curriculum. (Presidential address delivered to the Association of Public School Science Masters, Jan. 4, 1916.) *School World*, Lond., 1916, Feb., pp. 41-44. *Also, World's Work*, Lond., 1915-16, xxvii, 434-438. *Abstr.: Nature*, Lond., (Intensive work in school science), 1915-16, xcvi, 554-555. [*In his:* C. r., 1907-20, vi, No. 314.]

Address (autobiographical) before the American Club in Oxford, Feb. 12, 1916. (Not published but written for the compilation of Miss Blogg's bibliography by Dr. Wilburt C. Davison and preserved in the Library of the Johns Hopkins Hospital).

A plea for tradition. (Letter bearing joint signatures of Bryce, Curzon of Kedleston, William Osler, Gilbert Murray, and seventeen other leaders of the humanities). *The Times*, Lond., May 4, 1916.

1917

The library school in the college. (Address at the opening of the summer school of library science, Aberystwyth, July 31, 1917). *Library Ass. Rec.*, Lond., 1917, xix, 287-308. *Also*, in summer school of library science, Aberystwyth, July 30 to Aug. 11, 1917. "Report of directors and inaugural address by Sir William Osler, Bart., M.D., F.R.S., Aberdeen, printed at the University Press, 1917, 21-44. *Also*, under title "**The Science of Librarianship**", *Bull. Med. Lib. Ass.*, Balt., 1917-18, vii, 70-74. [*In his:* C. r., 1907-1920, vi, No. 318.]

1918

Introductory remarks made at the complimentary dinner to the president of the Library Association (Mr.—now Sir—J. Y. W. MacAlister) on

Dec. 14th, 1917. (Prof. Sir William Osler in the chair). *Library Ass. Rec.*, Lond., 1918, xx, 49-50.

The primary examination for the F.R.C.S., Eng.: An appeal to the President of the Royal College of Surgeons. (Signed correspondence, dated May 9, 1918.) *Lancet*, Lond., 1918, i, 715.

Protesting against the number of rejections.

The future of the medical profession under a Ministry of National Health. (Remarks at meeting of the Royal Society of Medicine, April 15, 1918.) Rept. *Lancet*, Lond., 1918, i, 804-805.

The future of the medical profession in Canada. Address delivered to the Canadian Army Medical Corps at Shorncliffe, Sept. 9, 1918 (unpublished).

1919

"Why is it so? Is it so?" (Editorial, signed). *J. Tenn. State M. Ass.*, 1919-20, xii, 222.

An optimistic view of the future practice of internal medicine in America.

The Dog's Bill. (Report of remarks at the special meeting of the British Medical Association, London, April, 1919.) *Brit. M. J.*, Lond., 1919, i, 494.

"The present proposals before Parliament were an unnecessary and inhuman obstruction to scientific work."

Medicine and nursing. *Oxford University Press*, 1919, 12 pp. 8°. *Also*, in *Essays on vocation*, edited by Basil Mathews, Lond., 1919, under title, **Vocation in medicine and nursing.**

This consists of extracts from the writings of William Osler, arranged by W. R. Brain, Esq., of New College, Oxford.

The medical services of the Navy, the Army of India, and the Air Force. **Toast proposed** at the British Medical Association dinner, Special Meeting, London, April 10, 1919. *Brit. M. J.*, Lond., 1919, i, 496.

Whole-time Clinical Professorships.

A letter on this subject outlining Sir William Osler's views upon it and recommending the establishment of these at McGill University was addressed by him to *The Dean of the Medical Faculty, McGill College,* and marked *"Circular Letter to Friends in Montreal"*. This letter is of so much interest at the present time that it is published in full below, by request, and with the permission of the McGill authorities. It is dated *13 Norham Gardens, Oxford, August 29th, 1919*, and reads as follows:

"The situation is this—McGill simply cannot afford to fall behind other first-class schools in the development of modern clinics in Medicine and Surgery, and Obstetrics and Gynecology. New conditions have arisen, to meet which it is essential to have sympathetic co-operation of university and hospitals.

Medically, Montreal occupies a unique position—a school with a record of splendid work, and two of the best equipped hospitals on the continent; but a new departure is needed which will involve change of heart as to methods, etc., and a realization of the full responsibility of the hospitals in this matter. It is their job quite as much as that

of the university; and the clinics should be under the control of both bodies jointly.

As to details:

(1) The establishment of two *Clinical Boards*, one of the M.G.H., and the other of the R.V.H., to control all arrangements relating to the hospital side of the university work. The Principal, the President of each hospital, with two collegiate and two hospital representatives to form each Board, which would be separate and independent and would control the appointments of the Heads of the Clinics.

(2) The *Clinics*: (a) 80-100 beds in each hospital for each medical and surgical clinic. (b) An out-patient department associated with each. (c) Ample clinical laboratory facilities. (d) Specific budgets for each clinic.

(3) *Personnel:* (a) Professor in charge of each clinic, appointed by the Clinical Board or by an *ad hoc* Committee named by them for this purpose. A whole-time man, or if thought wiser, largely so. Salary $10,000 paid partly by the university and partly by the hospital. (b) Assistants, whole and part time, *named by the Professor* and appointed by Clinical Boards, with salaries ranging from $3,000 to $1,000.

(4) *Teaching:* The complete control of the teaching of medicine and surgery would be in the hands of the two professors in each subject. Others would receive clinical professorship and help in the ward and other teaching.

(5) The Obstetrical and Gynecological Clinics could be organized on similar lines in connection with the hospitals and the university maternity.

(6) Throw the appointments open to the best men available.

Three things are necessary to carry out such a scheme:—

(a) Realization on the part of all concerned that we are at the parting of the ways and that a new deal is a necessity.

(b) A self-denying ordinance on the part of men at present in charge, and

(c) Money—for which an appeal should be made to the public. Possibly the Rockefeller Board might help, but this is a citizens' affair which should appeal to all who are anxious to see Montreal keep in first rank as a medical centre.

Yours sincerely,

WM. OSLER."

In 1924 the Rockefeller Foundation gave a half million dollars to McGill University toward a plan proposed by the University Department of Medicine for the establishment with the Royal Victoria Hospital of a University Clinic, the Director of this Clinic to be the Professor of Medicine on a whole-time basis.

VI. PUBLIC WELFARE ACTIVITIES

(Including European War)

CANADIAN PERIOD

(1869-1884)

1876

(Report from smallpox department of Montreal General Hospital from Dec. 14, 1873 to July 21, 1875.) **Remarks** on vaccination by Dr. Osler. *L'Union Méd. du Canada*, 1876, v, (Suppl. No. 20, Oct. 20, 1876, p. 20).

Two hundred and sixty-one cases were admitted between Dec. 14, 1873, and July 21, 1875, during which time Doctors Osler and Simpson had charge of the institution; there were seventy-three deaths, of which 58.8 per cent. were unvaccinated and 17.09 per cent. vaccinated subjects. Dr. Osler's signature is also appended to a document supporting vaccination that appears at the end of this supplement.

1880

[On the work of the Montreal City Board of Health, with especial reference to vaccination.] (Read by Dr. Larocque, before Medico-Chirurgical Society of Montreal, Jan. 9, 1880.) **Discussion** by Dr. Osler. Rept. *Canada M. Rec.*, Montreal, 1879-80, viii, 140.

Stresses the then general feeling that Montreal was filled with smallpox, the dread in the minds of many of coming to the city, the utterly inadequate accommodation at that time offered in the Smallpox Hospital, and the prophylactic method established in Germany in 1872.

1881

Official report of investigation into the origin and spread of an outbreak of typhoid. (Letter to University of Bishop's College, Lennoxville, signed T. Simpson, William Osler and J. C. Cameron.) *Canada M. & S. J.*, Montreal, 1880-81, ix, 440-445.

"A commission to inquire into the origin and spread of an outbreak of typhoid fever which occurred during the summer and autumn of 1880 at Bishop's College and Grammar School in Lennoxville."
This letter dated Jan. 21, 1881, is incorporated in an editorial entitled "Does typhoid arise spontaneously?" published in *Canada M. & S. J.*, Montreal, Feb., 1881. A preliminary report was first circulated.

1882

(A proposed vaccine institute, by Dr. Bessey.) **Discussion** by Dr. Osler. Rept. *Canada M. & S. J.*, Montreal, 1882-83, xi, 306.

PHILADELPHIA PERIOD

(1885-1889)

1885

The climate of Canada and its relation to life and health. By William H. Hingston, Montreal, Dawson Bros., 1884, 200 pp., 8°. (Unsigned book review.) *Med. News,* Phila., 1885, xlvii, 246-247.

Infectious pneumonia. (Unsigned editorial.) ***Med. News,*** **Phila., 1885, xlvii, 270.**

On an Italian epidemic at Tregnigo, a town of 2,000 inhabitants, one hundred persons being attacked, with thirty deaths.

[Imperial Customs Medical Reports.] (Unsigned editorial.) *Med. News,* Phila., 1885, xlvii, 438.

An account of the splendid work in parasitology done by the medical officers of this service in China.

Report of the English cholera commission. *Med. News,* Phila., 1885, xlvii, 631-632. (Unsigned editorial.)

Reviews the adverse report of the commission on the comma bacillus of Koch with animadversions on the prospective report of the American committee.

1887

A remarkable outbreak of typhoid fever. (Unsigned editorial.) ***Med. News,*** **Phila., 1887, l, 129.**

On an epidemic in France traceable to surface water wells.

Birthmarks as evidence. (Unsigned editorial.) *Med. News,* Phila., 1887, l, 213.

Disqualifying maternal impressions as a cause for legal conviction.

Leprosy in its relation to the state. (Unsigned editorial.) *Med. News,* Phila., 1887, li, 715.

1888

(On the geographical distribution of typhoid fever in the United States, by Dr. W. W. Johnston at 3rd session of Association of American Physicians, Washington, D. C., Sept. 18, 1888.) **Discussion** by Dr. Osler. Rept. *Trans. Assn. Am. Phys.,* 1888, iii, 45.

[Epidemic cerebro-spinal meningitis.] (Unsigned **editorial.**) *Med. News,* Phila., 1888, lii, 269.

Stressing the importance of accurate records of isolated cases and minor epidemics, from experience with persistence of sporadic cases in Philadelphia.

Vaccination against typhoid fever. (Unsigned editorial.) *Med. News,* Phila., 1888, lii, 351.

On immunity from dead cultures (Chantemesse and Widal).

1894

Registration of tuberculosis. (**Remarks** made at a special meeting of the College of Physicians of Philadelphia, in a discussion on the registration of pulmonary tuberculosis, January 12, 1894.) *Tr. College of Phys.,* Phila., 1894, 3rd series, xvi, 14-15. *Abstr.:* Phila. Polyclin., 1894, iii, 65°. *Also, Int. Med. Mag.,* Phila., 1894-95, iii, 123-4.

BALTIMORE PERIOD

(1890-1905)

1895

Typhoid fever in country districts. (Subject for general discussion at the ninety-seventh annual meeting of the Medical and Chirurgical Faculty of the State of Maryland, Apr. 23, 1895.) *Maryland M. J.*, Balt., 1895-96, xxxiii, 55-57. [*In his:* C. r., 1892-97, iii, No. 155.]

Osler closed the discussion with a resolution, which was unanimously passed, that "the authorities of the cities and counties throughout the State be urged to adopt means for the compulsory notification of cases of typhoid fever in their respective boards of health."

1898

The relation of typhoid mortality and sewerage. *Maryland M. J.*, Balt., 1897-98, xxxviii, 217-218. [*In his:* C. r., 1897-1902, iv, No. 192.]

1899

The problem of typhoid fever in the United States. (Address delivered before the Medical Society of the State of New York, Feb. 1, 1899.) Published as a pamphlet. Baltimore: J. Murphy Co., 1899, 13 pp. *Also, Albany M. Ann.*, 1899, xx, 121-130: *Med. News*, N. Y., 1899, lxxiv, 225-229. [*In his:* C. r., 1897-1902, iv, No. 199.]

The paper ends with these words: "For fifty years the profession has uttered its solemn protests, as I do this day; Mr. President, we have done more—*we have shown how the sacrifice may be avoided and the victims saved.*"

1900

[Vivisection.] (**Statement** of Dr. Osler.) In: *Vivisection. Hearing before the Senate Committee of the District of Columbia, Feb.* 21, 1900. On the bills (S.34) for the further prevention of cruelty to animals in the District of Columbia, Wash., 1900, Gov. Print. Off., 64-65.

The home treatment of consumption. (Read at the semi-annual meeting of the Medical and Chirurgical Faculty of Maryland, Westminster, Nov. 14, 1899.) *Maryland M. J.*, Balt., 1900, xliii, 8-12. *Also, Med. Mirror*, St. Louis, 1900, xi, 165-169. [*In his:* C. r., 1897-1902, iv, No. 210.]

On the study of tuberculosis. (Introductory remarks at the organization of a Society for the study of tuberculosis, Johns Hopkins Hospital, Oct. 30, 1900.) *Phila. M. J.*, 1900, vi, 1029-1030. [*In his:* C. r., 1897-1902, iv, No. 221.]

1903

The home in its relation to the tuberculosis problem. *Med. News*, N. Y., 1903, lxxxiii, 1105-1110. *Also, Sanitarian*, N. Y., 1904, lii, 322-336: *Rev. internat. de la tuberc.*, Par., 1905, vii, 403-413: *Rep. Henry Phipps Inst. study .... tuberculosis*, Phila., 1905, i, 141-154: *Am. J. Tubero.*, Detroit, 1905, i, 9-15: *Canada Lancet*, Toronto, 1904-05, xxxviii, 600-612. [*In his:* C. r., 1902-1907, v, No. 250.]

1904

["The Anglo-American relations with Canada."] (**Address** made to the Canadian Club, Toronto, at a luncheon, Dec. 29, 1904.) Rept. *The Globe*, Toronto, Dec. 30, 1904. *Abstr., Canad. Pract.*, Toronto, 1905, xxx, 36.

OXFORD PERIOD

(1905-1919)

1905

Address of the Vice-President. National Association for the Study and Prevention Tuberculosis, *Trans.*, 1905, N. Y., 1906, i, 20-27.

1907

Report of **remarks** on medical and hygienic inspection in schools. *Brit. M. J.*, Lond., 1907, ii, 355.

(Remarks made as president of Section 1 of the 2nd International Congress of School Hygiene held at the University of London, August 5, 1907.)

1908

Testimony before the Royal Commission on Vivisection. Appendix to *Fourth Rept., Commissioners, Minutes of Evidence*, Oct.-Dec., 1907, Lond., 1908, 157-167.

Twenty pages of most interesting reading covering a large range of topics and well worth the most careful study. Such topics as appendicitis, yellow fever, Listerism, cretinism, goitre, Galen's experiments on pigs, malaria, etc., are treated in detail and the whole discussion demonstrates the wonderful scientific knowledge of the witness.

What the public can do in the fight against tuberculosis. (Delivered at Dublin, Oct. 12, 1907, at the opening of the Tuberculosis Exhibition; also at the Tuberculosis Exhibition and Conference, Oxford, Nov. 8-13, 1909.) *In:* Ireland's Crusade against Tuberculosis, edited by the Countess of Aberdeen. Dublin: Maunsell & Co. Ltd., 1908, i, 17-28. *Also*, (in shorter form), Oxford: H. Hart, 1909, 7 pp, 8°: *Door of Hope*, Toronto, Easter, 1910, iv, No. 4: *Woman's Home Companion*, N. Y., 1910, xxxvii, 13; 67. [*In his:* C. r., 1907-10, vi, No. 276.]

A warning. (Letter, Oct. 14, 1908, signed.) *Lancet*, Lond., 1908, ii, 1268.

1909

Malaria in Italy: a lesson in practical hygiene. (Letter from Rome dated Mar. 3, 1909.) *The Times*, Lond., March 15, 1909, p. 5. *Abstr., Brit. M. J.*, Lond., 1909, i, 735.

Compulsory notification of tuberculosis. (Unsigned letter to the Women's National Health Association.) *Brit. M. J.*, Lond., 1909, ii, 725.

An address on the nation and the tropics. (Delivered at the London School of Tropical Medicine, Oct. 26, 1909.) Report of Proceedings at the Seaman's Hospital Society, Oxford, 1909. Univ. Press, 41 p. 8°. *Also*, Oxford, 1909, Univ. Press, 26 p. 8°: *Lancet*, Lond., 1909, ii, 1401-1406. [*In his:* C. r., 1907-1920, vi, No. 287.]

1910

[**Address** at the National Association for the Prevention of Consumption, Caxton Hall, Westminster, held July 19, 20 and 21, 1911.] Rept., *Lancet*, Lond., 1911, ii, 313-314.

The cost of sanitation in the tropics. (Signed correspondence, dated Oct. 3, 1910.) *Lancet*, Lond., 1910, ii, 1103.

Tuberculosis in Oxfordshire. (Letter, signed.) *Brit. M. J.*, 1910, ii, 646.

This letter is headed "Oxford County Association for the Prevention of Tuberculosis," and was presented at a meeting of the Henley Rural Council.

1911

Sanatoria for consumptives: medical opinions on the treatment. (**Statement**, with Sir Clifford Allbutt, Sir Lauder Brunton and Dr. A. Latham.) *The Times*, 1911, July 14, 4.

The prevention of tuberculosis. (Remarks at Oxfordshire Association, Whitney, Jan. 8, 1911.) Rept. *Brit. M. J.*, Lond., 1911, i, 327.

Sanatorium treatment of tuberculosis: The Welsh Memorial scheme. (Signed **statement** by Clifford Allbutt, Lauder Brunton, Arthur Latham, and William Osler. *Brit. M. J.*, Lond., 1911, ii, 125-127.

Report of **introductory address** at the National Association for the Prevention of Consumption, Caxton Hall, Westminster, July 20, 1911. *Lancet*, Lond., 1911, ii, 313-314.

The war against consumption. Defects in practice. (Address before the National Association for the Prevention of Consumption, July 20, 1911.) Rept. *The Times*, Lond., July 21, 1911, p. 6.

1912

Voice training for the clergy. (**Remarks** at conference held at Christ Church.) Quoted in edit., *Brit. M. J.*, Lond., 1912, ii, 1412-1413.

The tuberculosis campaign. (Letter to the Editor of The Times.) *The Times*, Lond., Aug. 16, 1912, p. 6.

Hopes for organization co-ordinating various boards and providing means for instruction in diagnosis as at Phipps Institute in America and Radcliffe Infirmary at Oxford.

1914

[Venereal diseases.] (**Evidence** given at the thirty-eighth meeting of the Royal Commission on Venereal Diseases.) Rept. *Brit. M. J.*, Lond., 1914, i, 1248.

Compulsory anti-typhoid vaccination. A necessary measure. (Letter from **Oxford** dated Aug. 27, 1914.) *The Times*, Lond., Aug. 29, 1914, p. 6.

Bacilli and bullets: an address to the officers and men in the camps at Churn. *Oxford Pamphlets*, Oxford Univ. press, 1914, 8 p. 12°. *Also, Brit. M. J.*, Lond., 1914, ii, 569-570: *Med. Mag.*, Lond., 1914, xxiii, 580-583. [*In his:* C. r., 1907-20, vi, No. 306.] (Fig. 16.)

From the beginning of the European War, Osler strove against those who opposed anti-typhoid inoculation.

Anti-typhoid vaccination. (Signed correspondence dated Oct. 3, 1914.) *Brit. M. J.*, Lond., 1914, ii, 647.

Emerson on England. (Letter from Oxford dated Oct. 21, 1914.) *The Times*, Lond., Oct. 22, 1914, p. 7.

The war and typhoid fever. (Delivered before the Society of Tropical Medicine and Hygiene, Nov. 20, 1914.) *Tr. Soc. Trop. M. & Hyg.*, Lond., 1914-15, viii, 45-61. *Also, Brit. M. J.*, Lond., 1914, ii, 909-913. [*In his:* C. r., 1907-20, vi, No. 307.]

OXFORD PAMPHLETS

1914

BACILLI AND BULLETS

BY

SIR WILLIAM OSLER

REGIUS PROFESSOR OF MEDICINE

One Penny net

OXFORD UNIVERSITY PRESS

HUMPHREY MILFORD

LONDON EDINBURGH GLASGOW

NEW YORK TORONTO MELBOURNE BOMBAY

FIG. 16.—Facsimile of title page. (Illustrating Rubric VI.)

Medical notes on England at war. (Signed correspondence. *J. Am. M. Ass.*, Chicago, 1914, lxiii, 2303-2305; 1915, lxiv, 679; 2001. *Also, West Canada M. J.*, Winnipeg, 1915, ix, 59-65; *Dominion M. Month.*, 1915, xliv, 41; 125.

1915

The prevention of venereal disease. Simple sanitary measures. (Letter signed by William Osler and others.) *The Times*, Lond., Dec. 28, 1914, p. 7.

This letter draws attention to the "opportune and grave warning" published in these columns Nov. 25, and says, "In view of this daily increasing menace to the health of the nation, is it not time that timid and hesitating counsels, leading to weak and ineffective action, should give place to clear advice and strong purpose?"

Inoculation against typhoid. An appeal to soldiers. (Undated letter.) *The Times*, Lond., Jan. 15, p. 9.

The epidemiology of cerebro-spinal meningitis. (Remarks in discussion, Feb. 26, 1915.) *Proc. Roy. Soc. Med.*, Lond., 1914-15, viii, Epidemiol. & State Med., 41-47.

Remarks on cerebro-spinal fever in camps and barracks. *Brit. M. J.*, Lond., 1915, i, 189-190. [*In his:* C. r., 1907-20, vi, No. 309.]

Mild small-pox. (Signed letter, dated Oxford, Feb. 13th.) *Lancet*,, Lond., 1915, i, 401.

In which he does not agree with the conclusions of Dr. Cleland and Dr. Ferguson in the preceding issue that "in Australia or elsewhere small-pox is unlikely to recover again its general intense virulence."

Arterio-venous aneurysm. (Remarks at a symposium on the subject at Radcliffe Infirmary, Oxford, March 26, 1915.) Rept. *Lancet*, Lond., 1915, i, 949-955. [*In his:* C. r., 1907-1920, vi, No. 310.]

In this article Osler made a plea that the (pathological) war specimens be sent from the hospitals at the front to the Museum of the Royal College of Surgeons.

The position of the army consultants. (Signed correspondence dated June 19, 1915.) *Lancet*, Lond., 1915, i, 1368.

The mobilization of faith. (Letter from Oxford dated June 19, 1915.) *The Times*, Lond., June 22, 1915, p. 9.

The prevention of tuberculosis. (Report of conference held in Oxford, July 17, 1915, under the auspices of the Oxfordshire Association.) *Brit. M. J.*, Lond., 1915, ii, 244.

War, wounds, and disease. *Quart. Rev.*, Lond., 1915, ccxxiv, 150-161.

"On the whole, the country may be congratulated on the comparatively small part disease has so far played in the Great War. There has been no epidemic on a large scale; and with effective measures it may be hoped that we shall escape the terrible experiences of South Africa and the Crimea."

Nerve and "Nerves". (Address at the Leeds Luncheon Club, Oct. 1, 1915.) Privately printed, 7 p. 8°. [*In his:* C. r., 1907-20, vi, No. 311.]

Harvard University Unit. 2nd Contingent. Visit to Oxford, December 3rd, 1915. (Printed card).

Giving itinerary of laboratories, hospitals, etc., to be visited.

Cold-bite + muscle-inertia = trench-foot. (Signed correspondence dated Dec. 12, 1915.) *Lancet*, Lond., 1915, ii, 1368.

Science and war. (An address delivered at the University of Leeds Medical School, Oct. 1, 1915.) Oxford: Clarendon Press, 1915, 40 p., 8°. *Also,* Oxford Univ. Press, Am. Branch, 1916, 39 pp., 8°: *Lancet,* Lond., ii, 795-901. *Abstr: Nature,* Lond., 1915-16, xcvi, 431-433. [*In his:* C. r., 1907-20, vi, No. 312.]

Contains a description of what Osler saw during his short trip to France.*

1916

Voices from hell. (Letter from the Athenæum Club dated Feb. 11, 1916.) *The Times,* Lond., Feb. 12, 1916, p. 7.

The supply of medical officers for Army and Navy. (With Sir Clifford Allbutt; signed correspondence.) *Lancet,* Lond., 1916, i, 972-973.

The tuberculous soldier. (An address at the 17th annual general meeting, National Association for Prevention of Tuberculosis, held at 20 Hanover Square, London, July 26, 1916.) *Lancet,* Lond., 1916, ii, 220-221. *Also, Brit. M. J.,* Lond., 1916, ii, 148.

Local tetanus. (Signed correspondence dated Nov. 12, 1916.) *Lancet,* Lond., 1916, ii, 877.

"The silent unit." (Christmas messages to Lloyd's readers.) *Lloyd's Weekly News,* Lond., Dec. 24, 1916, p. 3.

1917

The anti-venereal campaign. (Annual oration of the Medical Society of London, May 14, 1917.) *Tr. M. Soc.,* Lond., 1917, xi, 290-315. *Also, Lancet,* Lond., 1917, i, 787-792 (**The campaign against syphilis.**) Rept. *Brit. M. J.,* Lond., 1917, i, 694-696 (**Campaign against venereal disease**). [*In his:* C. r., 1907-20, vi, No. 317.]

The war emergency fund of the Royal Benevolent Fund. (**Letter** signed by **Sir William Osler,** Sir T. Clifford Allbutt and others, June 16, 1917.) *Brit. M. J.,* Lond., 1917, i, 858.

The problem of the crippled and the maimed. (Remarks at meeting at Oxford, June, 1917.) *Recalled to Life,* Lond., 1917, i, 265-266. *Also, Am. J. Care Cripples,* N. Y., 1917, v, 243.

**Sir William Osler in France.*

The following notes were extracted, in response to our request, by Brigadier-General H. S. Birkett from his War Diary (No. 3 Canadian General Hospital, McGill), with reference to this visit of Lieut-Col. Sir William Osler, Bart., M.D. F.R.S:

Camiers, Sept. 8th, 1915, 4.30 p.m. "Lieut-Col. Sir William Osler, Bart., M.D., F.R.S., Regius Professor of Medicine, Oxford University, arrived as our guest."

Camiers, Sept. 15th, 1915, 5.15 p.m. "Lieut-Col. Sir William Osler left this afternoon en route for England having spent the intervening time here going over most carefully the various Departments of the Hospital and seeing a large number of medical cases upon which his valuable advice was very much appreciated. He expressed himself in the highest terms of commendation upon the work which is being carried on by the various Departments. His visit here was one of encouragement and inspiration."

War wastage; a note of warning to examiners of recruits. *J. Am. M. Ass.*, Chicago, 1917, lxix, 290.

[Death of Revere Osler.] (Quotation from letter to the Journal of the American Medical Association about his son, Edward Revere, in editorial.) *J. Am. M. Ass.*, 1917, lxix, 1531.

"My son Edward Revere was wounded in the chest and abdomen by a shell August 29th, was taken to the casualty clearing station, at which my good friends George Brewer of New York, and George Crile were stationed. Darrack of New York operated and Crile transfused. His life-long friend Harvey Cushing was also with him. Everything possible was done, but he died about twenty hours later. Many of my friends would be glad to know of this."

1918

The curse of Meroz. (Letter from the Athenæum Club dated April 24, 1918.) *The Times*, Lond., April 25, 1918, p. 4.

Gas warfare. A weapon to be abolished. (Letter signed by Norman Moore, George H. Makins, William Osler, Clifford Allbutt, and others.) *The Times*, Lond., Nov. 29, 1918, p. 6.

The prevention of venereal disease. Simple sanitary measures. (Letter signed by William Osler and others.) *The Times*, Lond., Dec. 28, 1918, p. 7.

1919

Venereal disease. (Remarks as chairman of the Section of Medicine at the special meeting of the British Medical Association, London, April 11, 1919.) Rept. *Brit. M. J.*, Lond., 1919, i, 489.

[Toast proposed to the medical services of the Navy, the Army, of India and the air force, at the dinner of the British Medical Association, April 10, 1919, following the special London meeting.] Rept. *Brit. M. J.*, Lond., 1919, i, 496.

VII. VOLUMES EDITED

CANADIAN PERIOD

(1869-1884)

1877

Montreal General Hospital pathological report for the year ending May 1, 1877. By Wm. Osler, M.D., of McGill University. "Pathology is the basis of all true instruction in practical medicine. Wilks." vol. I, Montreal, Dawson Brothers, publishers, 1878. Frontispiece, 32 illus. 8°. Prel. matter 9. pp. 97. (Dedication to Jas. Bovell, M.D.) Published *also* in *Canada M. & S. J.*, Montreal, 1877-78, vi, 12-17; 52-55; 110-116; 152-163; 249-261. Four of the cases *also* in *Dobell's Diseases of the Chest*, (1876-77), 1878, iii, 54-55. *Reviews* in *Lancet*, Lond., 1878, i, 905. *Also*, in *Canad. J. M. Sc.*, Toronto, 1878, iii, 176: in *Am. J. M. Sc.*, Phila., 1878, lxxvi, 238-240. [*In his:* C. r., 1870-82, No. 22.] (Fig. 17.)

The first book which Dr. Osler saw through the press.

Transactions of the Canada Medical Association—tenth annual meeting —Montreal, Sept. 12, and 13, 1877. Montreal: Lovell Printing and Publishing Co., 1877, i, 244. (**Edited** by Wm. Osler, Secretary of Publication Committee.) *Review* in *Am. J. M. Sc.*, Phila., 1878, n. s., lxxv, 506-507.

1880

Montreal General Hospital Reports: Clinical and Pathological—by the medical staff. **Edited** by William Osler, M.D., M.R.C.P., Lond., vol. i, 369 pp., 8vo. Montreal, Dawson Brothers, publishers, 1880. (Dedication to G. W. Campbell, M.D., LL.D.) *Reviews* in *Canada M. & S. J.*, Montreal, 1879-80, viii, 354-356: *L'Abeille Médicale*, Montreal, 1880, ii, 137: *L'Union Méd. du Canada*, Montreal, 1880, ix, 158-160: *Am. J. M. Sc.*, Phila., 1880, lxxx, 245-250. [*In his:* C. r., 1870-82, i, No. 29.]

The first volume of Reports ever issued by a Canadian hospital, to which the Editor (Dr. Osler) contributed two articles (pp. 253-342, (listed below), and the **Pathological Report No. II from the Montreal General Hospital**, which was "a selection from 225 autopsies performed between October, 1877 and October, 1879."

1882

Collected reprints (C.r.). First series, (1872-1882), Montreal, 1882, 8°.

This volume was issued under the caption **Published memoirs and communications (to January 1st, 1882.)** There are 42 contributions listed in the index, though by a typographical error it is made to appear that there are 43. The numbers run from i to xliii, the number xxxviii having been omitted. All these papers were written during the Montreal period.

1883

Proceedings Medico-Chirurgical Society of Montreal, 1882-83. Published by the Society. (**Edited** by W. Osler). 8vo., 131 pp., Montreal Gazette Printing Co., 1884.

MONTREAL GENERAL HOSPITAL.

PATHOLOGICAL REPORT

FOR THE YEAR ENDING MAY 1ST, 1877,

BY

WILLIAM OSLER, M. D.

OF MCGILL UNIVERSITY.

"Pathology is the basis of all true instruction in practical medicine."—WILKS.

VOLUME I

MONTREAL:

DAWSON BROTHERS, PUBLISHERS,

1878.

FIG. 17.—Title page of the first book seen by Osler through the Press. (Illustrating Rubric VII.)

1885

Proceedings Medico-Chirurgical Society of Montreal, 1883-84-85. Published by the Society. 8vo., 193 pp., Montreal, Gazette Printing Co., 1886. (**Edited** by W. Osler.)

PHILADELPHIA PERIOD

(1885-1889)

1887

Extracts from transactions of the Pathological Society of Philadelphia, 1885-87, xii, xiii, Phila., pp. 69, 8°.

Twenty-five contributions which appear elsewhere in this list, under separate headings, the references there being to the transactions of the Philadelphia Pathological Society.

1889

Aequanimitas with other addresses to medical students, nurses and practitioners of medicine, Phila., 1904, P. Blakiston's Son & Co., 398 p. 12°: (the same), Lond., 1904, H. K. Lewis, 389 p. 12°. *Also*, (with three additional addresses), Phila., 1906, P. Blakiston's Son & Co., 435 p. 8°: (the same), Lond., 1906, H. K. Lewis, 485 p. *Also*, (with other addresses to medical students, nurses and practitioners of medicine) 3rd ed., Phila., 1914, P. Blakiston's Son & Co., 475 p. 12°.

BALTIMORE PERIOD

(1890-1904)

1892

Collected reprints (C.r.). Second series. (Jan. 1, 1882 to Jan. 1, 1892.) Baltimore, 1892, 8°.

There are 74 contributions listed in the index, the numbers running from xliv to cxvii. These include his writings during the late Montreal, the entire Philadelphia, and the early Baltimore period.

1897

Collected reprints (C.r.). Third series. (Jan. 1, 1892 to Jan. 1, 1897.) Baltimore, 1897.

There are 56 contributions listed in the index, the numbers running from cxviii to clxxiii. All these were written during the Baltimore period.

1901

Studies in typhoid fever. Nos. I., II. and III. (Extracted from vols. iv, v and viii of the *Johns Hopkins Hospital. Reports.*) **Edited** by William Osler. Balt., 1901, Johns Hopkins Press, 4°.

1902

Collected reprints (C.r.). Fourth series. (Jan. 1, 1897 to Jan. 1, 1902.) Baltimore, 1902.

There are 56 contributions listed in the index, the numbers running from clxxiv to ccxxix. All these were written during the Baltimore period.

OXFORD PERIOD

(1905-1919)

1907

Collected reprints (C.r.). Fifth series. (Jan. 1, 1902 to Jan. 1, 1907.) Oxford, 1907.

There are 34 contributions listed in the index, the numbers running from ccxxx to cclxiii. These include publications both in the Baltimore and Oxford periods.

Modern medicine, its theory and practice. In original contributions by American and foreign authors. (**Osler, W.**, and McCrae, T., **editors.**) vols. 1-3, Phila. & N. Y., 1907, Lea Brothers & Co., 8°; vols. 4-5, 1908, Lea & Febiger, 8°; vol. 6, 1909; vol. 7, 1910; vol. i, 2nd ed., Phila. & N. Y., 1913, Lea & Febiger, 8°; vols. 2-3, 1914; vols. 4-5, 1915; vols. i-ii, 3rd ed., Phila. & N. Y., 1925, Lea & Febiger, 8°, (re-edited by T. McCrae.) *Also:* there have been two English eds. under the title of *A System of Medicine*, edited by W. Osler and T. McCrae, London, Henry Frowde and Hodder and Stoughton. (Fig. 18.)

The quarterly journal of medicine. **Edited by William Osler and others.** Oxford, at the Clarendon Press, 1907-1919, vols. i-xii, roy. 8°.

1908

An Alabama student and other biographical essays. Oxford University Press, 1908, 334 p. 8°.

1913

Modern medicine, its theory and practice. In original contributions by American and foreign authors. (**Osler, W.**, and McCrae, T., **editors.**) 2. ed., vol. i, Phila. & N. Y., 1914, Lea Febiger, 8°; vols. 2-3, 1914; vols. 4-5, 1915.

1920

Collected reprints (C.r.). Sixth series. (Jan. 1, 1907 to Jan. 1, 1920.) Oxford, 1920.

There are 62 contributions listed in the index, the numbers running from cclxiv to ccexxv. His last published works at Oxford.

1925

Modern medicine, its theory and practice. In original contributions by American and foreign authors. (**Osler, W., and McCrae, T., editors.**) Vols. 1-2, 3rd ed., Phila. & N. Y., 1925, Lea & Febiger, 8°, (re-edited by T. McCrae.)

MODERN MEDICINE

ITS THEORY AND PRACTICE

IN ORIGINAL CONTRIBUTIONS BY AMERICAN AND FOREIGN AUTHORS

EDITED BY

WILLIAM OSLER, M.D.

REGIUS PROFESSOR OF MEDICINE IN OXFORD UNIVERSITY, ENGLAND; FORMERLY PROFESSOR OF MEDICINE IN JOHNS HOPKINS UNIVERSITY BALTIMORE; IN THE UNIVERSITY OF PENNSYLVANIA, PHILADELPHIA, AND IN MCGILL UNIVERSITY MONTREAL

ASSISTED BY

THOMAS McCRAE, M.D.

ASSOCIATE PROFESSOR OF MEDICINE AND CLINICAL THERAPEUTICS IN THE JOHNS HOPKINS UNIVERSITY, BALTIMORE

VOLUME I

EVOLUTION OF INTERNAL MEDICINE—PREDISPOSITION AND IMMUNITY—DISEASES CAUSED BY PHYSICAL, CHEMICAL AND ORGANIC AGENTS—BY VEGETABLE PARASITES—BY PROTOZOA—BY ANIMAL PARASITES—NUTRITION—CONSTITUTIONAL DISEASES

ILLUSTRATED

PHILADELPHIA AND NEW YORK
LEA BROTHERS & CO.
1907

FIG. 18.—Title page of vol. i of the first edition of Modern Medicine. (Illustrating Rubric VII.)

Bibliography of Writings about Osler

BIBLIOGRAPHY OF WRITINGS ABOUT OSLER

Cushing, Harvey. The Life of Sir William Osler. 2 vols, 8°. Oxford, Clarendon Press, 1925. *Reviews* in ***Münch. med. Woch.***, 1925, lxxii, 1799, (Dr. F. Müller); *Saturday Review,* N. Y., Nov. 21, 1925, p. 309-310, (Dr. Wm. H. Welch); *Evening Sun,* Baltimore, June 13, 1925, p. 9, (Dr. L. F. Barker); *Science,* N. Y., June 12, 1925, 611-613, (Lt.-Col. F. H. Garrison); *Military Surgeon,* Washington, 1925, lvii, 410-413, (Gen. F. A. Winter); *McGill News,* Montreal, Sept., 1925, p. 14, (Sir H. Rolleston); *Lancet,* Lond., 1925, i, 1031-1032; *American Mercury,* August, 1925, (H. L. Mencken); *Annals of Medical History,* N. Y., 1925, vii, 307-312, (Dr. Francis R. Packard); etc.

Sir William Osler Memorial Volume of the International Association of Medical Museums. Published and edited at Montreal, Canada, by **Maude E. Abbott.** Forewords by **Prof. William H. Welch,** and the late **Sir T. Clifford Allbutt.** Murray Printing Co., Limited, Toronto, 1926, pp. 635, 8°.

Classified Bibliography with Annotations of the Publications of Sir William Osler, Bart., F.R.S., etc., (1869-1921). Based on the chronological bibliography by Minnie Wright Blogg. Compiled, augmented and annotated by **Maude E. Abbott, Minnie Wright Blogg, E. B. Krumbhaar,** and **Archibald Malloch.** Edited by **Fielding H. Garrison** and **Henry W. Cattell.** *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, pp. 471-606.

Catalogue Raisonné of the Bibliotheca Osleriana, which was bequeathed by Sir William Osler to McGill University. (In nine sections: I. Prima; II. Secunda; III. Literaria; IV. Biographica; V. Historica; VI. Bibliographica; VII. Incunabula; VIII. Manuscripts; IX. Index). (*Now in the press*).

Abbott, A. C. A few reminiscences of Sir William Osler's Baltimore period. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 304.

Abbott, Rev. Almon. Memorial address. (At the Osler Memorial Service, St. Paul's Church, Baltimore, Md., January 1, 1920). (Privately printed).

Abbott, Maude E. The pathological collections of the late Sir William Osler. *Canad. M. Ass. J.*, 1920, n.s., x, 105.

The death of Sir William Osler. *Canad. M. Ass. J.*, 1920, n.s., x, 182. (Editorial, unsigned).

The pathological collections of the late Sir William Osler and his relations with the Medical Museum of McGill University. *Canad. M. Ass. J., Special Memorial Number*, 1920, July, 91-102.

Also, (with additions) *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 185.

Classified bibliography of Sir William Osler's Canadian period (1868-85). *Canad. M. Ass. J., Special Osler Memorial Number*, 1920, July, 103-123.

The evolution of modern medicine. By Sir William Osler, Bart. *Canad. M. Ass. J.*, 1922, xii, 49-50. (Book-Review).

The Sir William Osler memorial. Editorial preface. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, xix.

Sir William Osler. *Trans. Alumnæ Ass. Woman's Med. Coll. of Pa.*, Phila., June 6, 1924.

Abbott, Maude E., and **Rhea, L. J.** Sir William Osler, Bart., M.D., F.R.S. *Internat. Assoc. Med. Mus. Bull.*, 1922, viii, i-ii.

Abbott, Maude E., and **Wright, H. P.** Revival of Osler's "Men and Books" section in Jan., 1912, started with account of memorial meeting to Sir William Osler of the Montreal Medico-Chirurgical Society. *Canad. M. Ass. J.*, 1921, n. s., xi, 64-66.

Adami, J. George. Sir William Osler: The last days. *Canad. M. Ass. J., Special Osler Memorial Number*, 1920, July, 70-77.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 421.

Sir William Osler's part in the medical history of the war and the organization of the British Medical War Museum. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 80.

Allbutt, Sir T. Clifford. Proem. *Contributions to Med. & Biol. Research*, N. Y., 1919, Paul B. Hoeber, Vol. i, pp. vii-viii.

Sir William Osler, Bart., F.R.S. *Nature*, 1920, civ, 472-473.

[Remarks at the presentation to Sir William Osler, F.R.S., Bart., on the occasion of the Seventieth Anniversary of his Birthday, July 11, 1919.] *Brit. M. J.*, 1919, ii, 80. Also, *Lancet*, Lond., 1919, ii, 115. Also, *Ann. Med. Hist.*, 1919, ii, 188-190.

[A tribute to the Memory of Sir William Osler.] *Brit. M. J.*, 1920, i, 64.

Proem. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, xiii-xvii.

Allemann, Albert. Sir William Osler. *Berl. klin. Wchnschr.*, 1920, lvii, 603.

"Osler war einer der gelehrsten Aerzte unserer Zeit.....Ein edler, grosser Mann, eine Lichtgestalt in unserer dunkler schweren Zeit ist mit William Osler aus der Welt geschieden. Er war ein Freund der deutschen Wissenschaft, Auch Deutschland hat Grund seinen Tod zu bedauern."

Anders, Howard S. Osler: Some comments and cullings. *N. York M.J.*, 1920, cxi, 887-889.

Anderson, H. B. The Academy's debt and tribute to Sir William Osler. *Canad. Pract.*, 1922, xlvii, 248-253.

Anonymous. [Graduation thesis on pathological anatomy], (unpublished). *Canad. M. J.*, 1872, viii, 473-474.

[Dr. Osler elected a Fellow of the Royal College of Physicians of London, England.] *Canad. M. & S. J.*, 1883, xi, 767.

[Dr. Osler favourably mentioned in connection with the professorship of clinical medicine in the University of Pennsylvania.] *Med. News*, Phila., 1884, xlv, 161. Also, *Canad. M. & S. J.*, 1884, xiii, 62 (with additions).

[Notice of Dr. William Osler's election to the Chair of Clinical Medicine in the University of Pennsylvania.] *Med. News*, Phila., 1884, xlv, 403.

Farewell honors to Dr. Osler. *Med. News*, Phila., 1884, xlv, 445.

Professor Osler. *Canad, M. & S. J.*, Montreal, 1885, xiii, 185.

[Dr. William Osler elected professor of medicine in the Johns Hopkins University.] *Med. News*, Phila., 1888, liii, 422-423.

The departure of Dr. Osler. *J. Am. M. Ass.*, 1904, xliii, 679.

The Regius professor of medicine at Oxford. [Professor William Osler.] *Brit. M. J.*, 1904, ii, 395.

Dr. Osler and Oxford University. *Boston M. & S. J.*, 1904, cli, 223-224.

An outline history of Dr. Osler's professional work. *Maryland M. J.*, 1905, xlviii, 216-220.

Osler's methods as a teacher. *Maryland M. J.*, 1905, xlviii, 221-224.

The Osler dinner. *Med. News*, N. Y., 1905, lxxxvi, 845-846, (Editorial).

[Dinner to Dr. William Osler, May 2, 1905, Waldorf-Astoria, New York.] Privately printed, 1905, pp. 39. (List of those present and remarks of the speakers).

Dr. Osler and the Charaka Club Dinner. *Med. News.*, N. Y., 1905, lxxxvi, 513-514. Also, *Proc Char. Club*, N. Y., 1906, ii, 142-152.

Our Regius Professor. (Song). In booklet about dinner to Osler at New York, May 2, 1905, (See Anonymous under year 1905), pp. 18-19.

Osler at sixty, honored guest of the Medical and Chirurgical Faculty (of Maryland). *Maryland M. J.*, Balt., 1909, lii, port. (front).

(S. S.) The Student's guide to Osler. *Guy's Hosp. Gaz.*, Lond., 1909, xxiii, 420.

Our portrait gallery: William Osler. *Maritime M. News*, Halifax, 1910, xxii, 218-220, (port.)

Osler. *Univ. Durham Coll. Med. Gaz.*, Newcastle, 1910-11, xi, 23.

Biography. *Maryland M. J.*, Balt., 1911, liv, 222, (port.)

Biography. *Canad. M. Ass. J.*, Toronto, 1911, i, 763.

Portrait (Presentation of) of Sir William Osler, M.D., F.R.S. *Tr. Coll. Phys.*, Phila., 1914, xxxvi, 341-343.

The Osler presentation. *The Lancet*, Lond., 1919, ii, 115. Also, *Ann. Med. Hist.*, 1919, ii, 188-190. Also, *Brit. M. J.*, 1919, ii, 115.

Seventy years young. (Sir William Osler). *Lancet*, Lond., 1919, ii, 23.

William Osler's birthday. *J. Am. M. Ass.*, Chicago, 1919, lxxiii, 111.

[Health of Sir Wm. Osler.] *Brit. Med. J.*, 1919, ii, 609; 793.

The American Hospital for Great Britain. Osler original member of medical committee. *The Times*, July 18, 1919, p. 11.

Doctor William Osler. *J. Tenn. M. Ass.*, 1919-20, xii, 148. (Editorial).

William Osler. *Colo. Med.*, Jan., 1920, xvii, 3. (Editorial).

Professor Osler. *J. Iowa State M. Soc.*, 1919, ix, 321, (Editorial).

Sir William Osler. *South. M. J.*, 1919, xii, 423-425, (Editorial).

Sir William Osler. *Bull. Med. Library Ass.*, 1919, ix, 11-12.

Obituary. *Bristol M.-Chir. J.*, 1918-19, xxvi, 183.

A great teacher of medicine. *The Times*, Lond., 1919, Dec. 30, p. 13.

Sir William Osler. *The Evening Standard*, Lond., 1919, Dec. 30.

A message from Oxford. *Bull. Med. Soc. Maryland.*, 1919-20, xii, 47.

Sir William Osler at seventy—a retrospect. *J. Am. M. Ass.*, 1919, lxxiii, 106-107.

London letter. The presentation to Sir William Osler. *J. Am. Med.* Ass., 1919, lxxii, 705.

Sir William Osler's birthday. *J. Am. M. Ass.*, 1919, lxxiii, 111.

Sir William Osler's seventieth birthday; a notable anniversary. *Hosp.*, Lond., 1919-20, lxvi, 409.

Death of Sir William Osler, Bt. *The Daily Telegraph*, Lond., 1919, Dec. 30.

Obituary. *Med. Press*, Lond., 1919, n. s., cviii, 536.

(C. F.) Obituary. *Tr. Soc. Trop. M. & Hyg.*, Lond., 1919-20, xiii, 93.

The grand old man of medicine. *The Times*, Lond., 1919, Dec. 31, p. 13.

Obituary. *Bull. Univ. Maryland School Med.*, Balt., 1919-20, ix, 209.

Obituary. *Canada Lancet*, Toronto, 1919-20, liii, 229-232.

Obituary. *Canada Lancet*, Toronto, 1919-20, liii, 387-389.

Obituary. Sir William Osler, Bt., M.D., F.R.S., F.R.C.P. *Brit. M. J.*, 1920, i, 30-33, and 64-68. (Also, reprinted with some additions).

Obituary. *Illinois M. J.*, Chicago, 1920, xxxvii, 55.

Obituary. *Glasgow M. J.*, 1920, xciii, 82-85.

Obituary. *Tidsskr. f. d. norske Lægefor.*, Kristiania, 1920, xl, 229.

Obituary. *J. Am. M. Ass.*, Chicago, 1920, lxxiv, 261; 336-338.

Obituary. *Med. Rec.*, N. Y., 1920, xcvii, 25.

Obituary. *N. York M. J.*, 1920, cxi, 31.

Sir William Osler's funeral. *The Times*, Lond., 1920, Jan. 2, p. 13.

In Memoriam: Sir William Osler, (1907-1919). *Quart. J. Med.*, Oxford, 1919-20, xiii, No. 51.

Sir William Osler, Bart., M.D., F.R.S., F.R.C.P., D.Sc., L.L.D., D.C.L. *Canad. J. M. & S.*, 1920, xlvii, 105-111.

William Osler. *The Lancet*, 1920, i, 35.

Obituary. Sir William Osler, Bart., M.D., F.R.S. *The Lancet*, 1920, i, 56-59.

In Memory of Sir William Osler. *The Lancet*, 1920, i, 507.

Obituary. William Osler. *Med. J. Australia*, 1920, i, 47.

[William Osler.] *Brit. M. J.*, 1920, i, 21.

Resolutions passed at the meeting of the Baltimore City Medical Society, Jan. 9, 1920, and the Medical and Chirurgical Faculty and Book and Journal Club, Jan. 13, 1920. *Bull. Med. & Chi. Fac. Maryland*, 1920, xii, 59.

Death of Sir William Osler. *J. Indiana Med. Ass.*, 1919-20, xiii, 24-25.

Sir William Osler, Bart., M.D., F.R.S. *Science Progress*, 1920, xv, 128-129.

Sir William Osler: The "beloved physician" of Oxford. *The Observer*, Lond., 1920, Jan. 4.

Obituary, Sir William Osler. *The Oxford Mag.*, 1920, Jan. 30, 182-183.

The late Sir William Osler Memorial Institute at Oxford. *The Times*, Lond., 1920, Mar. 8, p. 15.

Sir William Osler, Bart., F.R.S. *The Periodical*, Oxford, 1920, vii, 102-103.

[A tribute to the memory of Sir William Osler.] *Brit. J. Tuber.*, 1920, xiv, 48.

Sir William Osler. *J. Am. Med. Ass.*, 1920, lxxiv, 36-44.

Dr. Osler's refutation of himself. *Literary Digest*, 1920, Jan. 17, 46-50.

Sir William Osler. Report of the Oxfordshire Ass. for Prev. of Tuberculosis, Holywell Press Ltd., Oxford, 1920.

The Passing of Sir William Osler. *South. M. J.*, 1920, xiii, 74-75.

Sir William Osler. *Boston M. & S. J.*, 1920, clxxxii, 232-236.

The late Sir Wm. Osler, *Brit. Med. J.*, 1920, i, 121. (Editorial).

Oxford Memorial to Sir William Osler. Osler Institute of General Pathology & Preventive Medicine. *Brit. M. J.*, 1920, i, 304, 369, 374, 423.

Memorial to Sir William Osler. *Science*, N. Y., 1920, n. s., li, 341.

Memorial service at Montreal. *Brit. Med. J.*, 1920, i, 205. (See also *Montreal Gazette*, Feb., 1920.)

Sir Wm. Osler at the Bodleian. *Brit. Med. J.*, 1920, i, 411. (Editorial).

Bequests of Sir William Osler. *Brit. M. J.*, 1920, i, 685.

Osler's will. *J. Am. M. Ass.*, Chicago, 1920, lxxiv, 1531.

Will (The) of Sir William Osler. *Med. Press*, Lond., 1920, n. s., cix, 372.

Memory (In) of Sir William Osler. *Lancet*, Lond., 1920, i, 507.

Memorial to Sir William Osler: an institute of general pathology and preventive medicine. *Hospital*, Lond., 1920, lxvii, 561. (Editorial).

Sir William Osler (1849-1919). *Univ. Durham Coll. Med. Gaz.*, 1920-21, xxi, 2.

Sir William Osler, (1849-1919). *Military Surgeon*, 1920, xlvi, 202-203. (Editorial).

The Osler Collection. *Bull. Med. & Chir. Fac. Maryland*, 1921, xiii, 35-37.

Sir William Osler, Bart., 1870. *The War Memorial Volume, Trinity College*, Toronto, 1922, p. 1. Printers Guild, Ltd.

In Memoriam—Sir William Osler. *Trinity College School Record*, (Port Hope), 1920, xxiii, 2-5.

Osler memorial meeting. *Johns Hopkins Alumni Mag.*, Balt., 1921, ix, 296-313.

Oxford Memorial to Sir William Osler. *The Times*, Lond., 1923, Mar. 22, p. 11.

Contributions to the science of medicine: Sir William Osler, Bart. *Med. J. & Rec.*, N. Y., 1924, cxix, 312.

Sir William Osler (The) memorial at Oxford; unveiling of plaque. *Brit. M. J.*, Lond., 1925, i, 1133.

Osler (The) memorial at Oxford. *Lancet*, Lond., 1925, i, 1319.

Libraries and Sir William Osler. *The Library Journal*, 1925, l, 704-5.

Armstrong, Geo. E. Student reminiscence—Montreal period. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 175.

Aschoff, J. Ludwig. Sir William Osler. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 435.

Barker, Lewellys F. Osler and the south. *South. M. J.*, 1919, xii, 345-346.

Osler as chief of a medical clinic. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 189-193.

Sir William Osler. *Evening Sun*, Baltimore, 1919, Dec. 30.

Osler at Johns Hopkins. *Canad. J. M. & S.*, 1920, xlvii, 135-146.

[Tribute to Osler.] *Am. Med.*, 1921, n.s., xvi, 15.

Dr. Osler as the young physician's friend and exemplar. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 251.

Bierring, W. L. A visit with Doctor Osler at Oxford. *J. Iowa State M. Soc.*, 1919, ix, 358-360.

Also, *Month. Bull.*, Chicago, 1919, v, 247-250.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 398.

Birkett, H. S. Note on Sir William Osler in France. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 600.

Blackader, A. D. Osler's Montreal days. *Canad. M. Ass. J., Special Osler Memorial Number*, 1920, July, 28-34.

"Enshrined in the hearts of medical men of two continents." *Am. Med.*, 1921, n.s., xvi, 15.

Osler's early work for Canadian scientific societies and as a teacher in Montreal. *Internat. Assoc. Med. Mus. Bull., Special Osler Number*, 1926, ix, 158.

Blogg, Minnie W. Bibliography. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 219-233. Also, reprinted separately, with addenda. Also, revised and enlarged with index, Baltimore, 1921, pp. 96.

Osler reminiscences, The Johns Hopkins Hospital Library. *Bull., Med. Library Ass.*, 1919, ix, 7-8.

Blumer, George. Random recollections of Sir William Osler in the early nineties. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 306.

Boggs, Thos. R. Osler as a bibliophile. *Johns Hopkins Hosp. Bull.*, 1919, xxx. 216.

Brigham, Edward H. Osler reminiscences, Boston Medical Library. *Bull. Med. Library Ass.*, 1919, ix, 9.

Brown, Lawrason. Some personal recollections of Sir William Osler and his influence on students of medicine. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 439.

Brown, Thomas R. Osler and the student. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 200-201. Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 265.

Death of Sir William Osler. *Bull. League Red Cross Societies*, 1920, i.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 430.

Brush, Edward N. Osler's literary style. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 217-233.

Osler's influence on other medical schools in Baltimore and his relation to the medical profession. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 208-209.

Also, *Bull. Med. & Chir. Fac.*, Maryland, 1919-20, xii, 15-18.

The death of Dr. Osler. *Am. J. Insan.*, 1920, lxxvi, 357. (Unsigned).

Bullock, Howard. Post graduate experiences abroad. (Address to Medical Society, University of Sydney), 1919, Nov.

Burr, Chas. W. Sir William Osler as a man of letters. *Am. J. M. Sc.*, 1920, clix, 625-630. Also, *Tr. Coll. Phys., Phila.*, 1920, xlii, 140-146.

Some personal reminiscences of Sir William Osler in Philadelphia. *Internat. Asso. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 222.

Cabot, R. C. Osler's great influence on the medical profession. *N. Y. Evening Post*, 1919, Dec. 30.

Camac, C. N. B. Oxford letter. *Med. Notes & Queries*, 1905, i, 145.

Dr. William Osler. *The Alumni Register, University of Pennsylvania*, Philadelphia, 1920, xxii, No. 5, 309-310.

The duty of the disciple. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 14.

Osler and medical gatherings. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 328.

Cameron, Irving H. Sir William Osler, Bart. *Canad. J. M. & S.*, 1920, xlvii, 105-111.

Osler—the man. *Canad, J. M. & S.*, 1920, xlvii, 120-135.

Cameron, Jean. Sir William Osler and the McGill Library. *Canad. M. Ass. J., Special Osler Memorial Volume*, 1920, July, 87-88. Also, *Internat. Ass. M. Mus. Bull., Special Osler Memorial No.*, 1926, ix, 200.

Cattell, Henry W. Dr. Osler. *Med. Notes & Queries*, 1906, ii, 18.

Oxford cum Osler and Baltimore sine Osler. *Med. Notes & Queries*, 1905, i, 11-12.

The new Sydenham Society. *Med. Notes & Queries*, 1905, i, 45.

Which are the best medical text-books? *Med. Notes & Queries*, 1906, ii, 29-30.

Osler, the medical editor. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 88.

Chaplin, Arnold. [A tribute to the memory of Sir William Osler.] *Brit. M. J.*, 1920, i, 66.

Chapman, R. W. [A tribute to the memory of Sir William Osler.] *Brit. M. J.*, 1920, i, 32

Chatard, J. A. Osler and the Book and Journal Club. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 211-212. Also, *Bull. Med. & Chir. Fac. Maryland*, 1919-20, xii, 11-12. Also, *Bull. de soc. med. d. hop. de Lyon.* 1914, xiii.

Chipman, W. W. Lecture on Sir William Osler. *McGill Daily*, 1920, Jan. 20.

The evolution of modern medicine. By Sir William Osler. (Book-Review). *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 104.

Chisholm, Murdoch. Student reminiscences—Montreal period. *Halifax Morning Chronicle.* Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 180.

Church, James Robb. Sir William Osler and the fixed period. *Mil. Surgeon*, 1920, xlvi, 678-682.

Clarke, C. K. Sir William Osler. *Canad. J. M. & S.*, 1920, xlvii, 155-156.

Clark, Oscar. Sir William Osler e sua philosophia (1849-1919). *Brazil-Medico*, 1921, xxxv, 338-340.

Sir Victor Horsley and Sir William Osler. *Brazil-Medico*, 1922, Dec. 9, xxxvi, pt. 2, 375-378,

Cole, Rufus. Sir William Osler, teacher and student. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 46.

Collier, Wm. Sir William Osler's clinics at the Radcliffe Infirmary. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 356.

Cone, Claribel. Making wardrounds with Dr. Osler. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 320.

Councilman, Wm. T. Some of the early medical work of Sir William Osler. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 193-197.

Osler in the early days at the Johns Hopkins Hospital. *Boston M. & S. J.*, 1920, clxxxii, 341-345.

Craick, W. A. The achievements of the Oslers. *MacLean's Magazine*, Toronto, 1913, March, 31-41.

Cronshaw, Rev. G. B. Sir William Osler and Oxford. A great living, life-giving personality. *Hospital*, Lond., 1920, lxvii, 361-363. (Unsigned).

Crozier, J. B. Some Personal Reminiscences of Sir William Osler. *Contrib. to Med. & Biol. Research*, N. Y., 1919, Paul B. Hoeber, Vol. 1, 38-39.

Coupal, James F. Osler's gift to the study of medicine. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 16.

Cushing, Harvey. William Osler: the man. *Boston Evening Transcript*, 1920, Jan. 5, Part 2. Also, *Ann. Med. Hist.*, 1919, ii, 157-167. Introduction (to *The Old Humanities and the New Science*). Boston, 1920, Houghton, Mifflin Co., pp. vi, v-xxi.

Laboratories: Then and Now. *Canad. M. Ass. J.*, 1923, xiii, 59-61.

THE LIFE OF SIR WILLIAM OSLER, *Clarendon Press*, 1925, 2 vols., illustrated, 8°. (*Vide supra.*)

Dana, Charles L. Sir William Osler, his services to society as physician and humanist. *The New York Times*, 1920, Jan. 2, p. 10.

Darey, J. Herbert. Student reminiscences—Montreal period. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 180.

Davison, Wilburt C. Sir William Osler and an Oxford medical student. *Internat. Ass. M. Mus. Bull., Special Osler Memorial No.*, 1926, ix, 381.

Delavan, D. Bryson. Reminiscence of Sir William Osler. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 202.

Dercum, F. X. Reminiscences. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 225.

Dock, George. Dr. William Osler in Philadelphia, 1884 1889. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 208.

Edwards, William A. Osler in Philadelphia. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 294.

Elliott, J. H. The Johnson cabinets in the Osler collection at the Academy of Medicine, Toronto. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 465.

Emerson, Charles P. Reminiscences of Sir William Osler. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 294.

Emmons, Elise. To Sir William Osler. 1919, Dec. 31. (Poem).

Epler, B. N. Reminiscences of Sir William Osler. *J. Mich. M. Soc.*, 1920, xix, 79.

Falconer, Sir Robert Alexander. A tribute from the President of the University of Toronto. *Canad. J. M. & S.*, 1920, xlvii, 159-160.

Field, D. L. Osler's nonsense. *Louisville M. J. M. & S.*, 1906, xii, 247-248.

Finney, J. M. T. A personal appreciation of Sir William Osler. *J. Am. M. Ass.*, 1921, lxxvii, 2013-2019.

Also, *Internat. Ass. M. Mus. Bull., Osler Memorial No.*, 1926, ix, 273.

Fisher, Chas. P. Osler reminiscences. College of Physicians. *Bull. Med. Library Ass.*, 1919, ix, 6.

Fremantle, F. E. [Letter to the Editor.] *The Times*, Lond., 1920, Jan. 2.

Friedenwald, Harry. [Remarks at Osler Memorial Meeting of the Medical and Chirurgical Faculty of Maryland, Osler Hall, January 13, 1920.] *Bull. Med. & Chir. Fac. Maryland*, 1919-20, xii, 60-62.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 338.

Futcher, Thos. B. Influence on the relations of medicine in Canada and the United States. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 204-205.

Sir William Osler, Bart., Etc., Regius Prof. Medicine, University of Oxford. *Johns Hopkins Alumni Mag.*, 1920-21, ix, 2-28.

Brief report of the presentation of memorial plaque to Johns Hopkins Hospital, Jan. 19th, 1925. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 453.

Garrison, Fielding H. Osler reminiscences, Library of the Surgeon General's Office. *Bull, Med. Library Ass.*, 1919, ix, 8-9.

Sir William Osler's contributions to medical literature. *Ann. Med. Hist.*, 1919, ii, 184-187.

The Osler presentation. *Science*, 1919, n.s., 50, 244-246.

Sir William Osler, 1849-1919. *Science*, 1920, n. s., li, 55-58.

Sir William Osler, (1849-1919). *Mil. Surgeon*, 1920, xlvi, 202-203.

Osler's place in the history of medicine. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 29.

Garrod, Sir A. E. Obituary notice of Sir William Osler, Bart., 1849-1919, (with photogravure). *Proc. Roy. Soc.*, 1920-21, xcii, pp. xvii-xxiv.

[Extract from letter describing pictures of Oxford memorial.] *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 451.

Gerster, A. G. Homage to Sir William Osler. (Paraphrase from Aristophanes). *Contributions to Med. & Biol. Research*, N. Y., 1919, Paul B. Hoeber, Vol. ii, 720.

Gibson, A. G. Osler at Oxford. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 378.

Gilcreest, E. L. Luncheon glimpses of Sir William Osler during the world war. *J. Am. M. Ass.*, 1920, lxxiv, 1662-1663. (Open letter.)

Sir William Osler—physician and philanthropist—glimpses during the world war. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 425.

Gildersleeve, Basil L. On a portrait of Sir William Osler, Bart. *Johns Hopkins Hosp. Bull.*, 1919, xxx, on Plate xxv, facing p. 206. (Poem).

Gulland, G. Lovell. [A Tribute to the memory of.] *Brit. M. J.*, 1920, i, 67.

Gwyn, Norman B. The boyhood of Sir William Osler. *Canad. M. Ass. J., Special Osler Memorial Number*, 1920, July, 24-27.

Sir William Osler—Early influences bearing on a great life. *Canad. J. M. & S.*, 1920, xlvii, 157. Also, *Canad. Pract.*, 1922, xlvii, 235.

Osler, student of the Toronto School of Medicine. *Ann. Med. Hist.*, 1923, v, 305-308.

The early life of Sir William Osler. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 109-

Hale-White, Sir William. Reminiscences of Sir William Osler. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 352.

Hamman, Louis. Osler and the tuberculosis work of the hospital. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 202-203.

Hare, Hobart A. William Osler as a teacher and clinician. *Tr. Coll. Phys.*, Phila., 1920, xlii, 131-139. Also, *Therap. Gaz.*, 1920, xliv, 160-164.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 212.

Heitz, Jean. Sir William Osler. *Arch. d. Mal. du Coeur*, 1920, xiii, 145.

Henry, Lydia S. The unveiling of the Oxford memorial plaque. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 452.

Hoffman, Frederick L. Sir William Osler. *The Public Health J.*, 1920, April 16, 435-436. (Poem).

Holmes, B. Votum medici. *Contrib. Med. & Biol. Research,* 1919, ii, 731.

Hoover, E. M. Sir William Osler; an estimation of his life. *J. Indiana M. Ass.,* 1920, xiii, 191-194.

Howard, C. P. Recollections of Sir William Osler's visit to No. 3 Canadian General Hospital (McGill). *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 409.

Hurd, Henry M. Some early reminiscences of William Osler. *Johns Hopkins Hosp. Bull.,* 1919, xxx, 213-215.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 262.

Sir William Osler and the Johns Hopkins Hospital. *Contrib. Med. & Biol. Research,* N. Y., 1919, Paul. B. Hoeber, Vol. ii, 732-735.

Jackson, Edward. William Osler. *Colorado Med.,* 1920, xvii, 3-4.

Jacobi, A. Dr. Osler: Author and physician. In booklet about dinner to Osler at New York, 1905, (see Anonymous under 1905). pp. 19-25.

Jacobs, H. B. Osler as a citizen and his relation to the tuberculosis crusade in Maryland. *Johns Hopkins Hosp. Bull.,* 1919, xxx, 205-208.

Also, *Bull. Med. & Chir. Fac. Maryland,* 1919-20, xii, 18-23.

Osler in vacation. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 91.

J., C. The late Sir William Osler. *Speculum,* (J. Melbourne Med. Student's Soc.), 1921, May, 33-36.

Also, re-issue, 1921, June.

Keen, W. W. A tribute to Sir William Osler. *Canad. M. Ass. J., Special Osler Memorial Number,* July, 1920, 39-41.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 246.

Keith, Sir Arthur. Osler and the medical museum. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 5.

Kelly, Howard A. A tribute to Sir William Osler. *South. M. J.,* Birmingham, Ala., 1919, xii, 346-347.

Osler as I knew him in Philadelphia and in the Hopkins. *Johns Hopkins Hosp. Bull.,* 1919, xxx, 215-216.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 259.

Sir William Osler, a tribute. *Ann. Med. Hist.,* 1919, ii, 168-169.

Impressions of Osler after a year. *Am. Med.,* 1921, n.s., xvi, 13.

Klebs, A. C. Osler at the tomb of Louis. *J. Am. M. Ass.,* 1906, xlvi, 1716-1717.

Klotz, Oscar. Our Debt. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 7.

Knapp, Charles. Sir William Osler on the classics. (Especially Aristotle and Lucretius). *Classical Weekly,* N. Y., 1920, xii, 89-90.

Knopf, S. Adolphus. Sir William Osler, Bart. In memoriam. *Am. Rev. Tubero.,* 1920, iii, 745-752. (From the advance sheets of *The History of the National Tuberculosis Association*).

Tuberculosis and the life and work of Sir William Osler. *Brit. J. Tuberculosis,* Lond., 1920, xiv, 97-103.

In memoriam—Sir William Osler, Bart. To the first anniversary of his death. *Am. Med.,* 1921, n. s., xvi, 17-26.

Personal reminiscences of Sir William Osler, Bart. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 321.

Kober, Geo. M. The influence of Osler on American medicine. *Contributions to Med. & Biol. Research,* N. Y., 1919, Paul B. Hoeber, Vol. ii, 756-766.

Also, *Tr. Ass. Am. Physicians,* 1919, xxxiv, 257-270.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 52.

Krumbhaar, E. B. Osler's connection with the Library of the College of Physicians of Philadelphia. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 237.

Lafleur, H. A. Early Days at the Johns Hopkins Hospital with Dr. Osler. *Canad. M. Ass. J., Special Osler Memorial Number,* 1920, July, 42-47.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 268.

Lamb, D. S. Osler at the Army Medical Museum. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 314.

Landis, H. R. M. The pathological records of the Blockley Hospital, Philadelphia Period (1885-1889). *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 232.

Lane, John. Sir William Osler, personal characteristics. *Morning Post,* Lond., 1920, Jan. 7.

Laveran, C. L. A. Décès de Sir William Osler associé ètranger. *Bull. Acad. de Méd.,* Paris, 1920, 3 s., lxxxiii, 207-208. Quoted *Brit. Med. J.,* 1920, i, 685.

Lawford, J. B. Osler reminiscences—Montreal period. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 179.

Leidy, Joseph, 2nd. Student reminiscences—Philadelphia period. *Inter. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 218.

Lewis, Morris J. Sir William Osler's sojourn in Philadelphia—especially his connection with the Orthopaedic Hospital and Infirmary for Nervous Diseases in 1887-88-89. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 227.

Libman, E. Osler and endocarditis and myeotic aneurisms. *Internat. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 10.

Lundsgaard, C. Obituary. *Ugeskr. f. Læger,* Kobenh., 1920, lxxxii, 52.

Lyell, James P. R. The late Sir William Osler. *The Times,* Literary Supplement, 1920, Jan. 8, (Letter to the Editor).

Macallister, Sir J. Y. W. The Osler Library (a tribute). *Library,* Lond., 1919, x, 139-156.

Also, reprinted by the De La More Press, Ltd., London, 1919.

Also, *Contributions to Med. & Biol. Research,* N. Y., 1919, Paul B. Hoeber, Vol. i, 111-121. (Primarily written for these Anniversary Volumes).

Also, Abstract in *Lancet,* Lond., 1919, ii, 340.

Macallum, A. B. Osler's influence on the research student. *Canad. M. Ass. J., Special Osler Memorial Number,* 1920, July, 89-90.

MacCallum, Wm. G. Osler as a pathologist. *Johns Hopkins Hosp. Bull.,* 1919, xxx, 197-198.

A student's impression of Osler. *Canad. M. Ass. J., Special Osler Memorial Number,* 1920, July, 47-50.

MacDonald, Adrian. Sir William Osler. *Canadian Portraits.* The Ryerson Press, Toronto, 1925, 192-208.

Macintosh, Ashley W. [A tribute to the memory of Sir William Osler.] *Brit. M. J.,* 1920, i, 67.

Mackall, Leonard L. Sir William Osler. *The papers of the Bibliographical Society of America,* for 1920, xiv, Part I, 20-32, Chicago, 1922.

Also reprinted same year for private circulation.

Also, under title, Osler as a bibliophile. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 97.

Sir William Osler (1849-1910). *The New York Herald Tribune,* 1924, Sept. 21, xi, 23.

Macklem, Rev. T. C. S. Osler Memorial Address. *Canad. Lancet,* Toronto, 1919-20, liii, 304-310.

Also, *Canad. M. & S. J.,* 1920, xlvii, 113-120.

Osler memorial service held in St. James Cathedral, Toronto, Sunday, Jan. 11, 1920. (Privately printed).

Maclean, George E. [A letter to the editor about Sir William Osler.] *The Times,* Lond., 1920, Jan. 2.

MacMurchy, Helen. Dr. Osler's Thursday Clinic at the Johns Hopkins Hospital in 1902. *Saturday Night,* Toronto, 1920, Jan. 17.
Also, *Canad. J. M. & S.,* 1920, xlvii, 160-164.
Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 311.

Madan, Falconer. [Report of remarks made at the Annual Meeting the Bibliographical Society in proposing a resolution after the death of Sir William Osler.] *Transactions of the Bibliographical Society,* Second Series, vol. i, (*The Library,* Fourth Series, vol. i, Oxford University Press, 1920, 44-46). (Quoted in *The Times,* 1920, Jan. 20, p. 13, under the title "A Lover of Men and Books").

The late Sir William Osler, Baronet. *Bodleian Quart. Rec.,* 1920, ii, 298-299. (Quoted, *Brit. M. J.,* 1920, i, 411.)

Malloch, Archibald. Sir William Osler at Oxford. *Canad. M. Ass. J., Special Osler Memorial Number,* 1920, July, x, 51-65.

Also, London, 1921, Chiswick Press, pp. 23. (Privately printed with some additions).

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 363.

Marchiafava, Ettore. Sir William Osler in Roma. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 18.

Marie, Pierre. Osler—éducateur. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 9.

Marshall, H. T. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 2nd impr., 1927, ix, 435.

Martin, C. F. Osler as a clinician and teacher. *Canad. M. Ass. J., Special Osler Memorial Number,* 1920, July, 82-86.
(Quoted, under Tributes to Osler, *Am. Med.,* 1921, xvi, n.s., 16).
Also, *Inter. Ass. Med. Mus. Bull., Spe. Osler Memorial No.,* 1926, ix, 41.

Martin, Edw. S. *Abroad with Jane,* Boston, 1919, D. D. Updike, The Merrymount Press, privately printed. (P. 111, William Osler is referred to as Sir Richard Holter.)
The best doctor of all. *Life,* N. Y., 1920, Jan. 15, lxxv, 100.

Matthers, Brander. A new view of Sir William Osler. *N. Y. Times,* 1920, May 23. (Book-review).

McConnell, J. B. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 2nd impr., 1927, ix, 175.

McCrae. Thomas. Osler and patient. *Johns Hopkins Hosp. Bull.,* 1919, xxx, 201-202.
A sketch of the life of the late Sir William Osler. *N. York M. J.,* 1920, cxi, 921.
William Osler. (Obituary). *Am. J. M. Sc.,* 1920, n.s., clix, (pp. 2, not numbered, after frontispiece).
Memoir of Sir William Osler, Bart., M.D., F.R.S. *Tr. Coll. Phys.,* Phila., 1920, lxii, 118-130.
The influence of Sir William Osler on medicine in America. *Canad. M. Ass. J.,* 1920, x, 102-105. Ibid., *Special Osler Memorial Number,* 1920, July, 78-81.
The influence of pathology upon the clinical medicine of William Osler. *Inter. Ass. M. Mus. Bull., Spec. Osler Memorial No.,* 1926, ix, 37.

McEachran, Duncan. Osler and the Montreal Veterinary College. *Canad. M. Ass. J., Special Osler Memorial Number,* 1920, July, 35-38.

McKenzie, R. Tait. Osler and art. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 397.

McPhedran, Alex. Sir William Osler's influence on medical education in the United States. *Canad. J. M. & S.,* 1920, xlvii, 151-153.

Mead, Kate C. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 2nd impr., 1927, ix, 438.

Mencken, H. L. Interesting People. *American Magazine,* 1909, Oct., 555.

Mills, C. K. Dr. William Osler in Philadelphia. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 205.

Mitchell, S. Weir. Presentation of *Cicero de Senectute.* In booklet about Dinner to Osler at New York, May 2, 1905. (see Anonymous under year 1905). pp. 26-28.
Books and the man. (Poem). Charaka Club, New York, 1906, ii, 1-4.
Also, this Bulletin, page 249.

Moore, Sir John W. [A tribute to the memory of Sir William Osler.] *Brit. M. J.,* 1920, i, 68.

Mosher, J. M. Sir William Osler. *Albany M. Ann.,* 1920, xli, 57-65.

Müller, Friedrich. William Osler. *Münch. med. Wchn.,* 1920, lxvii, 263-264.

Mullin, J. Heurner. The Hamilton memorial for Wentworth County. *Inter. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 457.

Murray, George R. [A Tribute to the memory of.] *Brit. M. J.,* 1920, i, 66.

Myers, Grace W. Osler reminiscences: Treadwell Library. *Bull. Med. Library Ass.,* July, 1919, ix, 6.

Newman, Sir George. A physician of two continents. *Friends' Quarterly Examiner,* 1920, 97-114.

Nixon, J. A. [A tribute to the memory of Sir William Osler.] *Bristol M. J.*, 1920, i, 66-67. Quoted in part under the title "An Osler anecdote." *Bull. Med. Lib. Ass.*, Jan., 1920.

Norris, Geo. W. Sir William Osler as host to Americans in England during the war. *Am. J. M. Sc.*, 1920, clix, 630-633.

Also, *Tr. Coll. Phys. Phila.*, 1920, xlii, 151-154.

Also, *Inter. Ass. M. Mus. Bull., Spec. Osler Memorial No.*, 1926, ix, 406.

Noyes, Marcia C. Osler's influence on the library of the Medical and Chirurgical Faculty of the State of Maryland. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 212-213.

Also, *Bull. Med. & Chir. Fac. Maryland*, 1919-20, xii, 12-14.
Osler reminiscences (Medical and Chirurgical Faculty). *Bull. Med. Library Ass.*, July, 1919, ix, 9-10.

Osborne, Marian. "Æquanimitas." "William Osler." *Poems*, Chiswick Press, Lond., 1914, 41; 63.
William Osler. A mezzotint. *Toronto Saturday Night*, 1920, Jan. 17.
Also, *Canad. J. M. & S.*, 1921, i, 43-46.
Poem. *The Song of Israfel and Other Poems;* The Macmillan Co., Toronto, 1923; Erskine MacDonald, Ltd., Lond., 1923; (To the memory of Sir William Osler, Bart.)
Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 429.
Recollection of Sir William Osler. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 171.
The Healer. (Poem). *Internat. Assoc. Med. Mus. Bull., Special Memorial Number*, 2nd impr., 1927, ix, 436.

Owens, Margaret. The unveiling of the Osler memorial tablet at the Montreal General Hospital. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 455.

Packard, F. R. Sir William Osler's services to medical history. (Osler memorial meeting, Jan. 3, 1920.) *Bull. Med. & Chir. Fac. Maryland*, 1919-20, xii, 65-72.
Sir William Osler and the Library of the College of Physicians of Philadelphia. *Tr. Coll. Phys. Phila.*, 1920, 3rd S., xlii, 147-150.
Literary influences on the writings of Osler. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 25.
The Life of Sir William Osler by Harvey Cushing. (Book-review.) *Am. Med. Hist.*, 1925, vii, 307-312.

Parfitt, C. D. Osler as an incentive. *Canad. Pract.*, 1922, xlvii, 244-247.
Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 316.

Parsons, H. C. Osler as a teacher. *Canad. J. M. & S.*, 1920, xlvii, 153-154.
Osler from the point of view of a house physician. *Canad. Pract.*, 1922, xlvii, 239-241.

Peck, Elizabeth A. A personal reminiscence. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 231.

Penfield, Wilder. A medical student's memories of the Regius Professor *Internat. Ass. M. Mus. Bull., Spec. Osler Memorial No.*, 1926, ix, 385.

Pollard, Alfred W. Preface [with personal reminiscences of William Osler] pp. v-ix, Illustrated Monographs No. xix, *Incunabula Medica. A Study of the Earliest Printed Medical Books*, 1467-1480, by Sir William Osler, Oxford, 1923. Printed for the Bibliographical Society at the Oxford University Press.

Powell, Lyman P. William Osler and old age. *Times,* N. Y., 1920, Jan. 4, p. 18.

Pratt, Joseph H. Osler as his students knew him. *Boston M. & S. J.,* 1920, clxxxii, 338-341.

Osler and tuberculosis. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 59.

Radin, Herman T. The literary flavor in the writings of Sir William Osler. *Med. Pickwick,* 1918, iv, 292-296.

Also, *Canad. Med. Quart.,* Feb., 1919, 215-220.

The Osler Festschrift. *Med. Pickwick,* 1920, vi, 294-296.

The beloved physician. *Medical Life,* 1925, xxxii, 275-289.

Ranck, S. H. How Osler inspired the Grand Rapids Tuberculosis Fight. *Michigan Out-of-Doors,* 1919-20, viii, 11.

Rawnsley, H. D. Sir William Osler: In memoriam. *Oxford Mag.,* 1920, Jan. 20, (Poem).

Reid, Edith. A giver of life. *Johns Hopkins Alumni Mag.,* 1921, ix, 311-313.

Reisman, David. Osler and the interurban club. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 333.

Rhea, L. J. Osler and pathology. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 12.

Student reminiscences, *Ibid.*

Rhea, L. J., and **Abbott, M. E.** Sir William Osler. *Internat. Assoc. Med. Mus. Bull.,* 1922, viii, 1-2.

Robb, Hunter. Dr. Osler's relations with the early days of the Johns Hopkins training school for nurses, etc. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 309.

Roberts, S. R. Sir William Osler, clinician-teacher. *South. M. J.,* 1924, xvii, 40-42.

Also. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 421.

Robertson, H. E. Personal reminiscences of Sir William Osler. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 315.

Robinson, Beverley. [A tribute to Sir William Osler.] *The New York Times,* 1920, Jan. 2, p. 10.

Rogers, Edmund J. A. Personal reminiscences of the earlier years of Sir William Osler. *Colorado Med.,* 1920, xvii, 88-95.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 163.

Rohrer, C. W. G. Sir William Osler, Bart. (Privately printed). Industrial Printing Company, Baltimore, 1921. (Poem by "Pedhammok'".)

Rolleston, Sir Humphry. Seventy years young. *Lancet,* 1919, ii, 23. (Unsigned).

[A tribute to the memory of Sir William Osler.] *Brit. M. J.,* 1920, i, 65.

Sir William Osler in Great Britain. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 347.

Rosencrantz, Esther. Student reminiscence. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 310.

Rosenthal, Melvin. One on the chief. *Med. Pickwick,* N. Y., 1920, vi, 251-252.

Rowntree, L. G. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 2nd impr., 1927, ix, 438.

Ruhräh, John. Sir William Osler. *Bull. Med. Library Ass.,* 1919, ix, 11-12.

Osler's influence on American Medical Libraries. *Ann. Med. Hist.,* 1919, ii, 170-183.

Also, *Bull. Med. & Chir. Fac. Maryland,* 1920, xii, 5-10.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 340.

The Osler Number. *Bull. Med. & Chir. Fac. Maryland,* 1920, xii, 1.

[Remarks at the Osler Memorial Meeting of the Medical and Chirurgical Faculty of Maryland, and the Book and Journal Club, Osler Hall, January 13, 1920.] *Bull. Med. & Chir. Fac. Maryland,* 1920, xii, 62-65.

Ruttan, R. F. Student reminiscences—Montreal period. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 182.

Schäfer, Sir E. Sharpey. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 2nd impr., 1927, ix, 351.

Schmidt, A. Osler reminiscences—Montreal period. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 183.

S., D. M. (Pseud.) An examination paper on Osler. (4th Edition). *St. Thomas' Hosp. Gaz.,* Lond., 1902, (written by Dudgeon, Mavrogordato, and Scott).

(Also, privately reprinted by William Osler, 1902, with some additions).

Also, *Am. Med.,* Philadelphia, 1902, iii, 723-724.

Also, *Boston, M. & S. J.,* 1902, cxlvi, 449.

Shattuck, F. C. A vigorous medical septuagenarian. *Boston M. & S. J.,* 1919, clxxxi, 46.

Address made to the Æsculapian Society, January, 1920. *Boston M. & S. J.,* 1921, clxxxv, 103-107.

Shepherd, F. J. Dr. Osler in Montreal: student and teacher. In booklet about dinner to Osler at New York, 1905, (See Anonymous under year 1905), pp. 6-8.

The late Sir William Osler. *McGill News,* Montreal, 1919-20, i, 25-26.

Sir William Osler, Bart. *Canad. M. Ass. J.,* 1920, x, 97-101; Ibid., *Special Osler Memorial Number,* 1920, July, 19-23.

Osler at McGill, 1870-1884. *Canad. J. M. & S.,* 1920, xlvii, 146-150.

[Address on Osler's Montreal period, delivered at the Osler memorial meeting of the New York Academy of Medicine, February, 1920.] *N. York M. J.,* 1920, cxi, 920-921.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number,* 1926, ix, 153.

Always an optimist. *Am. Med.,* 1921, xvi, n. s., 13-14.

Sherrington, Sir Chas. S. [A tribute to the memory of Sir William Osler.] *Brit. M. J.,* 1920, i, 65.

Singer, Charles. [A tribute to the memory of Sir William Osler.] *Brit. M. J.*, 1920, i, 31-32.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 360.

Smith, Edward Weir. Student reminiscences—Montreal period. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 184.

Smith, Laura E. Osler reminiscences: Library New York Academy of Medicine. *Bull. Med. Library Ass.*, 1919, ix, 6-7.

Spencer, Tillie M. From Dr. Osler's first probationer. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 308.

Smith, Tunstall. Sir William Osler. *Municip. J.*, Baltimore, 1920, viii, 1.

Stampa, S. Sir William Osler. *J. M. Ass.*, Georgia, 1921, x, 548-550.

Stevens, W. Mitchell. [A tribute to the memory of Sir William Osler.] *Brit. M. J.*, 1920, i, 67.

Stewart, G. D. Eulogy of the personality of the late Sir William Osler. *N. York M. J.*, 1920, cxi, 920.

Stewart, W. Grant. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 2nd impr., 1927, ix, 438.

Stokes, Hugh. William Osler. *Bull. of Fellowship of Med. & Post. Graduate Med. Ass.*, 1920, Jan. 3, 1-2. [Unsigned.]

Streeter, E. C. [Remarks at Osler memorial meeting, N. Y. Academy of Medicine, Feb. 28, 1920.] *N. York M. J.*, 1920, cxi, 922-923.

Osler as a bibliophile. *Boston M. & S. J.*, 1920, clxxxii, 335-338.

Impromptu in a library. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 393.

Strong, Rt. Rev. Sir Thomas. [A tribute to the memory of Sir William Osler.] *Brit. M. J.*, 1920, i, 64-65.

Sudhoff, Karl. Sir William Osler. *Mitt. z. Gesch. d. Med. u. d. Naturw.*, 1920, xix, 106-107.

Osler und die Geschichte der Medizin. *Internat. Assoc Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 28.

Symonds, Rev. H. Memorial sermon to the late Sir William Osler, Bart., M.D., F.R.S. *Canad. M. Ass. J., Special Osler Memorial Number*, July, 1920, 9-18.

Thayer, W. S. Osler, the teacher. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 198-200.

Osler. (Poem). *Ibid.*, 200.

Also, *Internat. Assoc., Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, xxxiv.

[Remarks at the Osler memorial meeting, Johns Hopkins Hospital, March 21, 1920.] *Johns Hopkins Alumni Mag.*, 1921, ix, 311.

Osler. *The Nation*, 1920, cx, 104-106.

Also, (with additions). *Bull. Med. & Chir. Fac. Maryland*, 1920, xii, 72-78.

Also, (with additions), *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 286.

Thomson, Arthur. [A tribute to the memory of Sir William Osler.] *Brit. M. J.*, 1920, i, 32-33.

Thomas, Henry M. Some memories of the development of the medical school and of Osler's advent. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 185-189.

Ticknor, Caroline. Sir William Osler and the thirteen pensioners of Ewelme. *Scribner's Mag.*, April, 1925, 425.

Todd, J. L. Osler as naturalist. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 149.

Toulmin, Harry. Student reminiscences—Philadelphia and Baltimore periods. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 229.

Vander Veer, Albert. William Osler, M.D. Personal reminiscences, (with editorial introduction). *Charlotte M. J.*, 1920, lxxxi, 137-139.

Van Dyke, Henry. The personality in the profession. *Johns Hopkins Alumni Mag.*, 1921, ix, 296-301.

Viets, Henry. Glimpses of Osler during the war. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 402.

Walsh, James J. A genius for friendship. *Am. Med.*, 1921, xvi, n.s., 14-15.

The Osler dinner. *Med. Notes & Queries*, 1905, i, 78-79.

Warren, Sir Herbert. In memoriam. *The Guardian*, 1920, Jan. 8.

Warthin, A. S. Osler and the International Association of Medical Museums. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 7.

Webb, D. A. Sir William Osler. *Ann. Med. Hist.*, 1921, iii, 45-49.

Weber, Parkes. Personal reminiscence. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 360.

Welch, William H. Dr. Osler in Baltimore: teacher and consultant. In booklet about dinner to Osler at New York, 1905, (see Anonymous under year 1905, 13-18.)

William Osler. *The Survey*, N.Y., 1920, xliii, 389.

[Remarks at Osler memorial meeting, Johns Hopkins Hospital, March 22, 1920.] *Johns Hopkins Alumni Mag.*, 1920, ix, 302-311.

[Remarks at Osler memorial meeting, N. Y., Academy of Medicine, Feb. 28, 1920.] *N. Y. M. J.*, 1920, cxi, 923-924.

Foreword. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, i.

Physician and humanist. *Saturday Review*, N. Y., Nov. 21, 1925, 309-310. (Book-review of Cushing's *Life*.)

A review of Harvey Cushing's life of Sir William Osler. Separately printed by permission of the *Saturday Review of Literature*, Nov., 1925, pp. 26.

Wenckebach, K. F. Sir William Osler, Bart. *Wien. klin. Wchnschr.*, 1920, xxxiii, 198.

Whitnall, S. E., and **Hart, B.** Sir William Osler and Oxford. *Canad. M. Ass. J., Special Osler Memorial Number*, 1920, July, 66-69. (Signed "Two Oxford Friends").

Willey, D. A. Osler. *Critic*, N. Y., 1905, xlvi, 411-415.

Williams, G. Huntington, Osler and the "Fixed Period." Murray Printing Co., Toronto, 1926, pp. 8.

Williamson, J. Physician authors. William Osler. *N. York M. J.*, 1922, cxv, 164.

Wishart, D. J. G. Osler from the standpoint of the undergraduate. *Canad. Pract.*, 1922, xlvii, 242-243.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 176.

Wilson, J. C. Aulus Cornelius Celsus and some remarks concerning rare editions of old books and medical libraries. *Bull. Med Lib. Ass.*, 1913-14, n.s. 3, No. i, 1-10.

Dr. Osler in Philadelphia: teacher and clinician. In booklet about Dinner to Osler in New York, 1905, (see Anonymous under year 1905, 9-13.)

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 243.

Winter, Francis A. Sir William Osler and the American medical officer. *Contributions to Med. & Biol. Research*, N. Y., 1919, Paul B. Hoeber, Vol. ii, 1267-1268.

Also, *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 391.

Some recollections of Sir William Osler during the war. *Mil. Surgeon*, 1920, xlvi, 682-684.

Wood, Alfred C. Personal reminiscence. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1925, ix, 231.

Wood, Casey A. Student reminiscences—Montreal period. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 178.

Woodhead, Sir German Sims. Sir William Osler. *Ibid.*, 33.

Woods, Hiram. [Dr. Osler's] influence in building up the medical and chirurgical faculty. *Johns Hopkins Hosp. Bull.*, 1919, xxx, 209-211. Also, *Bull. Med. & Chir. Fac. Maryland*, 1919-20, xii, 2-5.

Wright, Adam H. Sir William Osler, Bart. *Canad. Pract. & Rev.*, 1920, xlv, 58-59.

Wright, H. P., see Abbott, M. E. and Wright, H. P.

Wu Lien-Teh. Reminiscences of Sir William Osler in England. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 388.

Wylde, C. F. The housing of the Osler collection in the Medical Building, McGill University. *Internat. Assoc. Med. Mus. Bull., Special Osler Memorial Number*, 1926, ix, 462.

LIST OF SUBSCRIBERS TO THE PUBLICATION FUND

The Sir William Osler Memorial Volumes of the International Association of Medical Museums have been published by advance subscription, with the aid of a publication fund inaugurated by a grant of $500 from the National Research Council of Washington and generous initial contributions from the late Sir Edmund Osler and the late Hon. Mr. Justice Featherstone Osler, Toronto; Mrs. Robt. Reford and the late Alexander McFee, Esq., Montreal: J. J. Carty, Esq., and Dr. E. Libman, New York; the late R. B. Angus, Esq., the late Sir Thomas Roddick, Professors F. J. Shepherd, William Gardner, Charles F. Martin, W. W. Chipman, H. S. Birkett, F. G. Finley, W. F. Hamilton, H. D. Hamilton and W. Grant Stewart, Montreal: Professors Howard Kelly, L. F. Barker, W. S. Thayer, Henry Barton Jacobs and William H. Welch, Baltimore; Dr. Rufus Cole and Dr. C. N. B. Camac, New York; Dr. Edgar L. Gilcreest, San Francisco; Professors Thomas McCrae, E. J. G. Beardsley and John G. Clark, Philadelphia; Professor Geo. W. Crile, Cleveland; Dr. Ingersoll Olmsted, Hamilton; Dr. A. S. Warthin, Ann Arbor, Mich.; Dr. J. Clarence Webster, Shediac, N.B.; and Mrs. J. R. Redpath, Victoria, B.C.; and augmented by additional contributions from the following:

Abbott, Dr. A. C., University of Pennsylvania, Philadelphia.
Abbott, Dr. M. E., McGill University, Montreal.
* Adami, Dr. J. G., University of Liverpool, Liverpool, England.
Archibald, Dr. E. W., McGill University, Montreal.
Armstrong, Dr. Geo. E., 320 Mountain Street, Montreal.
Askanazy, Dr. Max, University of Geneva, Geneva, Switzerland.
Ball, Dr. James Moores, 4500 Olive Street, St. Louis, Mo.
Banting, Dr. F. G., University of Toronto, Toronto.
Babagar, Dr. A. C., Hospital for Mental Diseases, Brandon, Man.
Barlow, Sir Thomas, 10 Wimpole Street, London, England.
Barr, Sir James, Aigberth Vale, Liverpool, England.
Barnwell, Dr. John B., 32 South 22nd Street, Philadelphia, Pa.
Bazin, Dr. A. T., Medical Arts Building, Montreal.
Beattie, Dr. W. W., 369 Stanley Street, Montreal, Que.
Belt, Dr. A. Elmer, 722 Pacific Mutual Building, Los Angeles, Cal.

* Deceased.

BEST, DR. ELDRIDGE F., 384 Post Street, San Francisco, Cal.
BHATIA, DR. S. L., Grant Medical College, Bombay, India.
BIERRING, DR. WALTER M., Bankers Trust Building, Des Moines, Iowa.
BISHOP, MISS MARGARET, 4800 Walnut Street, Philadelphia, Pa.
BLACKADER, DR. A. D., 581 Sherbrooke Street West, Montreal, Que.
BLUMER, DR. GEORGE, 841 Whitney Avenue, New Haven, Conn.
BOLES, DR. RUSSELL S., 1711 Spruce Street, Philadelphia, Pa.
BRAMWELL, SIR BYROM, 10 Heriot Row, Edinburgh, Scotland.
BRAMWELL, DR. EDWIN, 23, Drumsheugh Gardens, Edinburgh, Scotland.
BRANCH, DR. ARNOLD, Hospital of the Rockefeller Institute, New York.
BROWN, DR. ALAN, Hospital for Sick Children, Toronto, Ont.
BROWN, DR. GEO. A., 614 Sherbrooke Street West, Montreal.
BROWN, DR. LAWRASON, Saranac Lake, N.Y.
BROWN, DR. THOS. R., 17 West Biddle Street, Baltimore, Md.
BRUCE, DR. HERBERT A., 64 Bloor Street West, Toronto, Ont.
BUNTING, DR. C. H., University of Wisconsin, Madison, Wis.
BURGESS, DR. H. C., 118 Crescent Street, Montreal, Que.
BURR, DR. CHARLES W., 1918 Spruce Street, Philadelphia, Pa.
BURROUGHS, WELCOME, Co., London, England.
BUTLER, DR. MARGARET F., 1831 Chestnut Street, Philadelphia, Pa.
BYERS, DR. W. G. M., 346 Mountain Street, Montreal, Que.

CAMERON, IRVING H., ESQ., 307 Sherbourne Street, Toronto, Ont.
CAMPBELL, DR. A. E., 11 Waterden Road, Guildford, England.
CAMPBELL, DR. G. GORDON, 123 Crescent Street, Montreal.
CAMPOS, DR. ERNESTO DE SOUZA, Rio de Janeiro, Brazil.
CARSON, DR. WM. J., University of Maryland, Baltimore, Md.
CHRISTELLER, DR. ERWIN, Kaiserdamm 64, Berlin, Germany.
COLLEDGE, DR. LIONEL, 2 Upper Wimpole St., W.1, London, England.
COLLIER, DR. WILLIAM, 48 Woodstock Road, Oxford, England.
CONE, DR. CLARIBEL, 1701 Eutaw Place, Baltimore, Md.
CORNUNG, PROF. H. K., Anat. Instit., 20 Pestalozzistr. Bâle, Switzerland.
COTTON, DR. THOS. A., 86 Brook St., W.1., London, England.
COUPAL, MAJOR JAMES F., Army Medical Museum, Washington, D.C.
COWLISHAW, DR. L., Gordon Road, Lindfield, N.S.W., Australia.
CRAIG, DR. ROBT. H., 570 Sherbrooke Street West, Montreal.
CROLL, L. DUNCAN, ESQ., 304 Prince Arthur Street W., Montreal, Que.
CROWE, DR. S. J., 4332 North Charles Street, Baltimore, Md.
CROWE, DR. NORAH, Kingsclere, Preston Park, Brighton, England.
CROWELL, DR. B. C., Jefferson Medical College, Philadelphia, Pa.
CRUIKSHANK, DR. W. D., American Press, Beirut, Syria.

DAVIES, DR. ARTHUR T., 9 Tokenholme Yard, London, S.W.1., England.
DAVIS, DR. JAMES E., Detroit Medical College, Detroit, Mich.
DAVISON, DR. WILBURT C., Johns Hopkins Hospital, Baltimore, Md.
DE JONG, PROF. DE JOSSELIN, University of Utrecht, Utrecht, Holland.

Delavan, Dr. Bryson, 40 East 41st Street, New York, N.Y.
Dercum, Dr. Francis X., 1719 Walnut Street, Philadelphia, Pa.
Doane, Dr. Joseph C., Philadelphia General Hospital, Philadelphia, Pa.
Dock, Dr. George, Chamber of Commerce Building, Pasadena, Cal.
Donaldson, Dr. Robert, St. George's Hospital, London, England.
Downs, Dr. Chester A., Masonic Temple, Salem, Oregon.
Drummond, Lady, 216 Drummond Street, Montreal, Que.
Elliott, Dr. J. H., 11 Spadina Road, Toronto, Ont.
Ellis, Dr. A. G., Siriraj Hospital, Bangkok, Siam.
Emerson, Dr. Charles P., 602 Hume Mansus Bldg., Indianapolis, Ind.
Ewing, Dr. James, Cornell University Medical School, New York.
Finch, Drs. E. and F., 55 Wilkinson Street, Sheffield, England.
Flack, Miss Agnes, 2121 North College Avenue, Philadelphia, Pa.
Fletcher, Dr. H. Morley, 98 Harley Street, London, England.
Folger, Prof. A. F., Royal High School, Copenhagen, Denmark,
Foot, Dr. N. C., University of Cincinnati, Cincinnati, Ohio.
Francis, Dr. W. W., 13 Norham Gardens, Oxford, England.
Freemantle, Col. F. E., Bedwell Park, Herts, England.
French, Dr. Herbert, 62 Wimpole Street, London, England.
Friedenwald, Dr. Julius, 1013 North Charles Street, Baltimore, Md.
Futcher, Dr. Thomas B., Johns Hopkins Hospital, Baltimore, Md.
Garrison, Dr. Fielding H., Army Medical Museum, Washington, D.C.
Garrod, Sir Archibald E., 85 Banbury Road, Oxford, England.
Gibson, Dr. A. G., 87 Banbury Road, Oxford, England.
Girdlestone, Dr. G. R., Old Road, Headington, Oxford, England
Goldblatt, Dr. Harry, Western Reserve University, Cleveland, Ohio.
Goldbloom, Dr. Alton, 143 Crescent Street, Montreal, Que.
Goldschmidt, Dr. L. B., Hilliards Bldgs., Capetown, S. Africa.
Goltman, Dr. Max, Memphis, Tenn.
Gordon, Dr. A. H., Medical Arts Building, Montreal, Que.
Graham, Dr. J. M., 6 Castle Terrace, Edinburgh, Scotland.
Graves, Dr. Stuart, University of Louisville, Louisville, Ky.
Greer, Dr. James R., 122 South Michigan Avenue, Chicago, Ill.
Gullen, Dr. A. Gordon, 37 Rodney St., Liverpool, England.
Gurd, Dr. D. F., 124 Bishop Street, Montreal, Que.
Gwyn, Dr. N. B., 48 Bloor Street East, Toronto, Ont.
Hall, Dr. de Haviland, 57 Waldegrove Park, Twickenham, England.
Hamburger, Dr. Louis, 1207 Eutaw Place, Baltimore, Md.
Hare, Dr. H. A., 1801 Spruce Street, Philadelphia, Pa.
Harris, Dr. Norman MacL., 53 McLaren Street, Ottawa, Ont.
Haythorn, Dr. S. R., University of Pittsburgh, Pittsburgh, Pa.
Hellier, Mr. Francis J., Bank View, Chapel Allerton, Leeds England.
Henderson, Dr. George Dallas, 312 Maple Street, Holyoke, Mass.
Henry, Dr. Lydia S., Hillcrest Apts., Cote des Neiges, Montreal, Que.
Herbert, Mrs. Edward, 969 New Boston Road, Fall River, Mass.

HILLYER, MISS MARION, 1703 Spruce Street, Philadelphia, Pa.
HOEBER, PAUL B., ESQ., 67 East 59th Street, New York, N.Y.
HOLMES, DR. A. HILLYARD, 29 Manley Road, Manchester, England.
HOLTERS, DR. O. R., 513 2nd Avenue, Ashbury Park, New Jersey.
HOWARD, DR. A. C. P., Montreal General Hospital, Montreal, Que.
* HOWK, DR. HORACE J., Mt. McGregor, N.Y.
HUNNER, DR. GUY L., 2305 St. Paul Street, Baltimore, Md.
HURRELL, DR. GEORGE, Newcastle-on-Tyne, England.
HURST, DR. ARTHUR F., Windsor Forest, Berks, England.
HUTCHISON, DR. J. A., 354 Mackay Street, Montreal, Que.
ISCA, A. W., ESQ., 210 S. 7th Street, Minneapolis, Minn.
JACKSON, DR. HENRY, 380 Marlborough Street, Boston, Mass.
JACOBS, DR. H. BARTON, 11 Mount Vernon Place, Baltimore, Md.
JACOBSON, DR. VICTOR C., Albany Hospital, Albany, N.Y.
JACOCKS, DR. W. P., Homeleigh, Castle St., Colombo, Ceylon.
JOHAN, DR. BELA, 1 Kelenhegiji'ut 33, Budapest, Hungary.
JOHNSON, MR. GALE L., Langwith, Englewood, N. J.
JOHNSTON, H. WYATT, ESQ., 25 Bellingham Road, Outremont, Que.
JONES, DR. NOBLE W., Stevens Building, Portland, Oregon.
JONES, SIR ROBERT, 11 Nelson St., Liverpool, England.
JUDAH, E. L., ESQ., Medical Museum, McGill University, Montreal, Que.
KARSNER, DR. HOWARD T., Western Reserve University, Cleveland, Ohio.
KARSTED, DR. ALFRED, 209 Metals Bank Building, Butte, Mo.
KAUFMANN, DR. JOSEPH, 124 Crescent Street, Montreal, Que.
KHANOLKAR, DR. V. R., Sunderdas Med. College, Bombay, India.
KIRKPATRICK, DR. T. P., 11 Fitzwilliams Place, Dublin, Ireland.
KLEBS, DR. ARNOLD C., Les Terrasses, Nyon, Switzerland.
KLINE, DR. B. S., 3319 Greenway Road, Cleveland, Ohio.
KOLMER, DR. JOHN A., 2101 Pine Street, Philadelphia, Pa.
KNOPF, DR. S. A., 16 West 95th Street, New York, N.Y.
KRUMBHAAR, DR. E. B., Philadelphia General Hospital, Philadelphia.
LAFLEUR, DR. H. A., 67 Ontario Avenue, Montreal, Que.
LAMBERT, DR. SAMUEL W., 130 E. 35th Street, New York.
LARSEN, DR. NELS P., Queen's Hospital, Honolulu, T.R.
LAWFORD, DR. J. B., 27 Weymouth Street, London, England.
LEAGUE OF RED CROSS SOCIETIES, 2, Ave. Velasquez, Paris, France.
LEVINE, DR. S. A., 270 Commonwealth Avenue, Boston, Mass.
LEWIS, DR. D. SCLATER, 166 Crescent Street, Montreal.
LEWIS, DR. MORRIS J., 1316 Locust Street, Philadelphia, Pa.
LUCKE, DR. BALDWIN, University of Pennsylvania, Philadelphia, Pa.
LUNAM, DR. H., Campbellton, N.B.
LUSK, DR. GRAHAM, 1030 5th Avenue, New York.
MACKENZIE, DR. K. A., 69 Spring Garden Road, Halifax, N.S.
MACNEAL, DR. W. J., 82 Rockrose Place, Forest Hills, N.Y.

* Deceased.

MacNider, Dr. William deB., University of North Carolina, Chapel Hill, N.C.
Major, Dr. R. H., Bell Memorial Hospital, Kansas City, Kan.
Mallory, Dr. F. B., Boston City Hospital, Boston, Mass.
Malone, Dr. R. H., Bombay Bacteriological Laboratory, Parel, Bombay, India.
Mandlebaum, Dr. F. S., Mount Sinai Hospital, New York, N.Y.
Marshall, Dr. Harry T., University of Virginia, University, Va.
Martindale, Dr. Louisa, 28 Weymouth Street, London, England.
McAllister, Sir Donald, The University, Glasgow, Scotland.
McCombe, Dr. John, St. Catharines, Ont.
McKean, Dr. Richard M., 1515 David Whitney Bldg., Detroit, Mich.
McKenzie, Dr. R. Tait, 2014 Pine Street, Philadelphia, Pa.
McLatchie, Dr. Lola, Woman's Medical College, Philadelphia, Pa.
McLean, K. S., Esq., 464 Sherbrooke Street West, Montreal, Que.
McLennan, Hon. John S., 50 Ontario Avenue, Montreal, Que.
Meakins, Dr. J. C., Royal Victoria Hospital, Montreal, Que.
Meredith, Miss L. Orem, Woman's Medical College, Philadelphia, Pa.
Meyer, Dr. Willy, 700 Madison Avenue, New York, N.Y.
Miles, Dr. Walter R., Stanford University, Cal.
Miller, Dr. C. H., Pennsylvania Park, Exeter, England.
Miller, Dr. Joseph L., 122 Michigan Avenue, Chicago, Ill.
Moffitt, Dr. H. C., 384 Post Street, San Francisco, Cal.
Monroe, Prof. T. K., 12 Somerset Place, Glasgow, Scotland.
Morris, Dr. Roger S., Cincinnati General Hospital, Cincinnati, Ohio.
Morrish, Dr. W. J., 32 Thrale Road, Streatham, S.W.16, London, Eng.
Muir, Mr. R., Path. Dept., Edinburgh University, Edinburgh, Scotland.
Mullin, Dr. J. Heurner, 201 South James Street, Hamilton, Ont.
* Mullin, Dr. Robt. Hyndham, Vancouver, B.C.
Murray, Dr. Archibald, 335 Henry Street, Brooklyn, N.Y.
Murray, Dr. George R., 13 St. John Street, Manchester, England.
Mussen, Dr. Aubrey T., Johns Hopkins Hospital, Baltimore, Md.
Nadgir, Dr. Y. G., Grant Medical College, Bombay, India.
Nicholls, Dr. A. G., Dalhousie University, Halifax, N.S.
Norris, Dr. Charles, 344 West 72nd Street, New York, N.Y.
Ophuls, Dr. William, Lane Hospital, San Francisco, Cal.
Opie, Dr. Eugene L., Johns Hopkins Hospital, Baltimore, Md.
Owens, Dr. Margaret, Royal Victoria Hospital, Montreal, Que.
Pappenheimer, Dr. Alvin M., Hartsdale, N.Y.
Parfitt, Dr. C. D., Calydor Sanitarium, Gravenhurst, Ont.
Paterson, Dr. Donald H., 48 Queen Anne Street, London, England.
Paulli, Prof. Simon, Veterinary High School, Copenhagen, Denmark.
Peirce, Harold, Esq., 222 Drexel Building, Philadelphia, Pa.

* Deceased.

PLATT, MR. HARRY, M.S., F.R.C.S., 26 St. John St., Manchester, Eng.
POPE, DR. EMMA W., Fitzhugh Building, San Francisco, Cal.
POUJOL, PROF., Faculté de Médicine, University of Algeria, Algiers.
POWER, SIR D'ARCY, 10 Chandos Street, Cavendish Sq., London, Eng.
PRATT, DR. JOSEPH, 270 Commonwealth Avenue, Boston, Mass.
PRESSLY, DR. MAUDE, Harrisburg Hospital, Harrisburg, Pa.
PRICE, DR. F. W., 133 Harley Street, W., London, England.
PRIMROSE, DR. ALEXANDER, Dean of the Medical Faculty, University of Toronto, Ont.
QUESNEL, DR. ULRICH, University of Upsala, Upsala, Sweden.
REDPATH, MRS. JOHN R., 369 Sunrise Avenue, Victoria, B.C.
REFORD, DR. LEWIS L., 287 Drummond Street, Montreal, Que.
REILLY, DR. W. G., 151 Drummond Street, Montreal.
REYNELL, DR. G. R., 26 Nottingham Place, London, W.1, England.
RHEA, DR. L. J., Montreal General Hospital, Montreal, Que.
RICHARDSON, DR. E. A., 9 E. Chase Street, Baltimore, Md.
ROBB, DR. HUNTER, 55 Beacon Street, Winchester, Mass.
ROBERTS, DR. STEWART R., 20 Ponce de Lion Avenue, Atlanta, Ga.
ROBERTS, DR. THOS. S., Zoological Museum, University of Minnesota, Minneapolis, Minn.
ROBERTSON, MISS GRACE, 263 Bishop Street, Montreal.
ROBERTSON, DR. H. E., Mayo Clinic, Rochester, Minn.
ROBERTSON, MISS JESSIE, Royal Victoria Hospital, Montreal.
ROBERTSON, MRS. JOHN STEWART, 263 Bishop Street, Montreal.
ROBINSON, DR. G. S., 15 Esplanade West, Sunderland, England.
ROBINSON, DR. J. L., 127 Westmount Avenue, Toronto, Ont.
ROLLESTON, SIR HUMPHRY, Southfield, Trumpington Road, Cambridge, England.
ROSENCRANTZ, DR. ESTHER, University of California, San Francisco, Cal.
ROWNTREE, DR. LEONARD G., Mayo Clinic, Rochester, Minn.
ROYCE, DR. CLAYTON E., St. Luke's Hospital, Bethlehem, Pa.
SABIN, DR. FLORENCE, Johns Hopkins Hospital, Baltimore, Md.
SABRAZES, DR. J., 50, rue Ferrere, Bordeaux, France.
SALE, MR. LLEWELLYN, 3519 Washington Blvd., St. Louis, Mo.
SAMPSON, DR. JOHN A., 180 Washington Blvd., St. Louis, Mo.
SCHÆFER, SIR E. SHARPEY, Edinburgh University, Edinburgh, Scotland.
SCOTT, DR. HAROLD, Zoological Society of London, Regent's Park, London, England.
SCRIMGER, DR. F. A. C., Medical Arts Building, Montreal.
SEGALL, DR. HAROLD N., University College Hospital, Gower Street, London, England.
SHATTUCK, DR. F. C., 135 Marlborough Street, Boston, Mass.
SHANKS, DR. GEORGE, Medical College, Calcutta, India.
SILVA, DR. O. D'UTRA, Caixa Postal, 674 Sao Paulo, Brazil.
SLACK, DR. HARRY R., JR., 1100 North Charles Street, Baltimore, Md.

* Smith, Dr. A. J., Universty of Pennsylvania Medical School, Philadelphia, Pa.
Smith, Dr. E. Weir, 199 West Main Street, Meriden, Conn.
Smith, Dr. Hugh H., 520 North Broadway, Baltimore, Md.
Smith, Dr. Lawrence Weld, Harvard Medical School, Boston, Mass.
Smithies, Dr. Frank, 1020 Ardmore Avenue, Chicago, Ill.
Souza, Dr. H. de Paula, Institute of Hygiene, Rio de Janeiro, Brazil.
Spencer, Miss Tillie L., 610 N. Broadway, Baltimore, Md.
Starr, Dr. F. N. G., 112 College Street, Toronto, Ont.
Stephens, Dr. J. W., School of Tropical Medicine, Liverpool, England.
Stewart, Dr. M. J., The Medical School, Leeds, England.
Stewart, Dr. W. Grant, Montreal.
Stockton, Dr. Charles G., 436 Franklin Street, Buffalo, N.Y.
Strouss, Dr. Sol, 104 Michigan Avenue, Chicago, Ill.
Talley, Dr. Jas. E., 1811 Spruce Street, Philadelphia, Pa.
Teacher, Dr. John H., 32 Kingsborough Gardens, Glasgow, W.2., Scotland.
Teh, Dr. Wu Lien, Manchurian Plague Service, Harbin, China.
Thin, Dr. James, 55 South Bridge, Edinburgh, Scotland.
Thomas, Dr. H. W., Liverpool School of Tropical Medicine, Manaos, North Brazil.
Thomson, Dr. John, 14 Coates Crescent, Edinburgh, Scotland.
Tidy, Dr. H. Letheby, 39 Devonshire Place, London, England.
Todd, Dr. John L., McGill University, Montreal, Que.
Toulmin, Dr. Harry S., Penn Mutual Life Insurance Co., Philadelphia.
Tracy, Dr. Ira O., 181 Hancock Street, Brooklyn, N.Y.
Turnbull, Dr. Hubert M., Pathological Institute, London Hospital, Whitechapel, London, England.
Turner, Dr. G. Grey, Osborne Road, Newcastle-on-Tyne, England.
Tyson, Dr. Cornelius, 270 Park Avenue, New York.
Vipond, Dr. Chas. W., 516 Dorchester Street West, Montreal.
Weber, Dr. F. Parkes, 13 Harley Street, London, England.
Webster, Dr. J. Clarence, Shediac, N.B.
Webster, Dr. J. H. Douglas, 71 Hamilton Terrace, St. John's Wood, London, N.W., England.
Weiss, Dr. Edward, Jefferson Medical College, Philadelphia, Pa.
Weller, Dr. Carl V., University of Michigan, Ann Arbor, Mich.
Wells, Dr. H. Gideon, University of Chicago, Chicago, Ill.
White, Dr. Paul D., Massachusetts General Hospital, Boston, Mass.
Williams, Dr. Francis H., 508 Beacon Street, Boston, Mass.
Willcox, Sir William, 40 Welbeck Street, London, England.
Williams, Dr. Huntington, Dept. of Health, Albany, N. Y.
Wilson, Dr. James C., 1509 Walnut Street, Philadelphia, Pa.

* Deceased.

WILSON, MISS MARGARET B., Hunter College, New York.
WINNE, DR. CHAS. K., JR., 151 Chestnut Street, Albany, N.Y.
WOLFSOHN, DR. JULIUS, 1800 Gough Street, San Francisco, Cal.
WOLMAN, DR. SAMUEL, 2444 Eutaw Place, Baltimore, Md.
WOOD, DR. CASEY A., 201 Chestnut Street, Wilmington, S.C.
YOUNG, DR. HUGH, Johns Hopkins Hospital, Baltimore, Md.

ERRATA

Page 448, line 14, for "Hodgson" read "Dodgson".
Page 453, Footnote, precede by asterisk and transfer to page 454.
Page 470, 10th line from foot of page for "Johnston" read "Johnson".
Facing page 471, under Fig. 3, for 29 read 69.
Page 476, 10th line from foot of page: after 1882-92, read ii.
Page 534, in first line read: 3rd Chinese Edition from 9th English edition, 1925.
Page 588, Footnote should read: See footnote on pages 591-592.